

[Roll No. 56]

YEAS—267

Abraham  
Aderholt  
Allen  
Amodei  
Ashford  
Babin  
Barletta  
Barr  
Barton  
Beatty  
Becerra  
Beyer  
Bilirakis  
Bishop (GA)  
Bishop (UT)  
Black  
Blackburn  
Blum  
Blumenauer  
Bonamici  
Boustany  
Brady (TX)  
Brat  
Bridenstine  
Brooks (AL)  
Brooks (IN)  
Brown (FL)  
Buchanan  
Bustos  
Butterfield  
Byrne  
Calvert  
Capps  
Cardenas  
Carney  
Carson (IN)  
Carter (TX)  
Castro (TX)  
Chabot  
Cicilline  
Clark (MA)  
Clarke (NY)  
Clay  
Cleaver  
Coffman  
Cohen  
Cole  
Collins (NY)  
Comstock  
Conaway  
Cook  
Cooper  
Courtney  
Cramer  
Crawford  
Crenshaw  
Crowley  
Cuellar  
Culberson  
Davis (CA)  
Davis, Danny  
DeGette  
DeLauro  
DelBene  
Dent  
DeSaulnier  
DesJarlais  
Deutch  
Diaz-Balart  
Doggett  
Doyle (PA)  
Duncan (SC)  
Duncan (TN)  
Edwards  
Ellison  
Emmer  
Engel  
Eshoo  
Esty  
Fattah  
Fincher  
Fleischmann  
Fleming  
Forbes  
Fortenberry  
Foster  
Frankel (FL)  
Franks (AZ)  
Frelinghuysen  
Gabbard  
Gallego

Garamendi  
Garrett  
Gibbs  
Goodlatte  
Gosar  
Gowdy  
Graham  
Granger  
Graves (LA)  
Grayson  
Grothman  
Guinta  
Guthrie  
Hahn  
Hardy  
Harper  
Harris  
Heck (WA)  
Hensarling  
Higgins  
Himes  
Hinojosa  
Huelskamp  
Huffman  
Hultgren  
Hurd (TX)  
Hurt (VA)  
Issa  
Jeffries  
Johnson (GA)  
Johnson, E. B.  
Johnson, Sam  
Jolly  
Kaptur  
Keating  
Kelly (IL)  
Kelly (PA)  
Kennedy  
Kildee  
Kilgore  
King (IA)  
King (NY)  
Kline  
Knight  
Kuster  
Labrador  
LaMalfa  
Lamborn  
Larsen (WA)  
Latta  
Lawrence  
Levin  
Lieu (CA)  
Lipinski  
Loebach  
Long  
Lowenthal  
Lucas  
Luetkemeyer  
Lujan Grisham  
(NM)  
Lummis  
MacArthur  
Maloney  
Carolyn  
Marino  
Massie  
McCarthy  
McCaul  
McClintock  
McCollum  
McHenry  
McKinley  
McMorris  
Rodgers  
McNerney  
Meadows  
Meeks  
Meng  
Messer  
Mica  
Miller (FL)  
Miller (MI)  
Moolenaar  
Moulton  
Mullin  
Murphy (PA)  
Nadler  
Napolitano  
Neugebauer  
Newhouse  
Noem

Nunes  
O'Rourke  
Olson  
Palmer  
Pascarella  
Payne  
Pelosi  
Perlmutter  
Perry  
Pingree  
Pitts  
Pocan  
Polis  
Pompeo  
Posey  
Price (NC)  
Quigley  
Ribble  
Richmond  
Roby  
Rogers (KY)  
Rohrabacher  
Rokita  
Roskam  
Ross  
Rothfus  
Royce  
Ruiz  
Ruppersberger  
Russell  
Ryan (WI)  
Salmon  
Sanford  
Scahill  
Schiff  
Schweikert  
Scott (VA)  
Scott, Austin  
Scott, David  
Sensenbrenner  
Sessions  
Sherman  
Shimkus  
Shuster  
Simpson  
Sinema  
Smith (MO)  
Smith (NE)  
Smith (NJ)  
Smith (TX)  
Speier  
Stefanik  
Stewart  
Stivers  
Stutzman  
Takai  
Takano  
Thornberry  
Titus  
Tonko  
Trott  
Upton  
Van Hollen  
Vela  
Wagner  
Walden  
Walker  
Walorski  
Walters, Mimi  
Walz  
Wasserman  
Schultz  
Waters, Maxine  
Watson Coleman  
Webster (FL)  
Welch  
Westerman  
Westmoreland  
Whitfield  
Williams  
Wilson (SC)  
Wittman  
Womack  
Yarmuth  
Yoho  
Young (IA)  
Young (IN)  
Zeldin  
Zinke

NAYS—148

Adams  
Aguilar  
Amash

Bass  
Benishek  
Bera

Bishop (MI)  
Bost  
Boyle (PA)

Brady (PA)  
Brownley (CA)  
Buck  
Bucshon  
Burgess  
Capuano  
Carter (GA)  
Cartwright  
Castor (FL)  
Clawson (FL)  
Clyburn  
Collins (GA)  
Connolly  
Conyers  
Costa  
Costello (PA)  
Cummings  
Curbelo (FL)  
Davis, Rodney  
DeFazio  
Delaney  
Denham  
DeSantis  
Dingell  
Dold  
Duffy  
Elmiers  
Farenthold  
Farr  
Fitzpatrick  
Flores  
Foxy  
Fudge  
Gibson  
Graves (GA)  
Graves (MO)  
Green, Al  
Green, Gene  
Hanna  
Hartzler  
Hastings  
Heck (NV)  
Herrera Beutler  
Hice (GA)  
Hill  
Holding  
Honda

Hoyer  
Hudson  
Huizenga (MI)  
Hunter  
Israel  
Jackson Lee  
Jenkins (KS)  
Jenkins (WV)  
Johnson (OH)  
Jones  
Jordan  
Joyce  
Katko  
Kilmer  
Kind  
Kinzinger (IL)  
Kirkpatrick  
Lance  
Larson (CT)  
Lewis  
LoBlundo  
Loudermilk  
Love  
Lowey  
Lujan, Ben Ray  
(NM)  
Lynch  
Maloney, Sean  
Marchant  
Matsui  
McDermott  
McGovern  
McSally  
Meehan  
Mooney (WV)  
Moore  
Mulvaney  
Murphy (FL)  
Neal  
Nolan  
Norcross  
Nugent  
Palazzo  
Pallone  
Paulsen  
Pearce  
Peters

Peterson  
Pittenger  
Poe (TX)  
Poliquin  
Price (GA)  
Ratcliffe  
Reed  
Reichert  
Renacci  
Rice (NY)  
Rice (SC)  
Rigell  
Rogers (AL)  
Rooney (FL)  
Ros-Lehtinen  
Rouzer  
Roybal-Allard  
Ryan (OH)  
Sanchez, Linda  
T.  
Sanchez, Loretta  
Sarbanes  
Schakowsky  
Schock  
Schrader  
Serrano  
Sewell (AL)  
Sires  
Slaughter  
Swalwell (CA)  
Thompson (CA)  
Thompson (MS)  
Thompson (PA)  
Tiberi  
Tipton  
Torres  
Turner  
Valadao  
Vargas  
Veasey  
Velázquez  
Visclosky  
Walberg  
Weber (TX)  
Wenstrup  
Woodall  
Yoder

ANSWERED "PRESENT"—1

Gohmert

NOT VOTING—17

Chaffetz  
Chu (CA)  
Duckworth  
Griffith  
Grijalva  
Gutiérrez

Langevin  
Lee  
Lofgren  
Nunnelee  
Rangel  
Roe (TN)

Rush  
Smith (WA)  
Tsongas  
Wilson (FL)  
Young (AK)

□ 1420

So the Journal was approved.

The result of the vote was announced as above recorded.

PERSONAL EXPLANATION

Mr. ROE of Tennessee. Mr. Speaker, I was unable to vote today because of a serious illness in my family. Had I been present, I would have voted: Roll Call #54—Yea; Roll Call #55—Yea; Roll Call #56—Yea.

# REPEAL OF THE PATIENT PROTECTION AND AFFORDABLE CARE ACT

Mr. PITTS. Mr. Speaker, pursuant to House Resolution 70, I call up the bill (H.R. 596) to repeal the Patient Protection and Affordable Care Act and health care-related provisions in the Health Care and Education Reconciliation Act of 2010, and for other purposes, as amended, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore (Mr. SIMPSON). Pursuant to House Resolution 70, the amendment printed in House Report 114-13 is adopted, and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 596

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

## SECTION 1. REPEAL OF PPACA AND HEALTH CARE-RELATED PROVISIONS IN THE HEALTH CARE AND EDUCATION RECONCILIATION ACT OF 2010.

(a) PPACA.—Effective on the date that is 180 days after the date of the enactment of this Act, the Patient Protection and Affordable Care Act (Public Law 111-148) is repealed, and the provisions of law amended or repealed by such Act are restored or revived as if such Act had not been enacted.

(b) HEALTH CARE-RELATED PROVISIONS IN THE HEALTH CARE AND EDUCATION RECONCILIATION ACT OF 2010.—Effective on the date that is 180 days after the date of the enactment of this Act, title I and subtitle B of title II of the Health Care and Education Reconciliation Act of 2010 (Public Law 111-152) are repealed, and the provisions of law amended or repealed by such title or subtitle, respectively, are restored or revived as if such title and subtitle had not been enacted.

## SEC. 2. BUDGETARY EFFECTS.

The budgetary effects of this Act shall not be entered on either PAYGO scorecard maintained pursuant to section 4(d) of the Statutory Pay-As-You-Go Act of 2010.

## SEC. 3. REPORTING REPLACEMENT LEGISLATION.

The Committee on Education and the Workforce, the Committee on Energy and Commerce, the Committee on the Judiciary, and the Committee on Ways and Means of the House of Representatives shall each report to the House of Representatives legislation proposing changes to existing law within each committee's jurisdiction with provisions that—

(1) foster economic growth and private sector job creation by eliminating job-killing policies and regulations;

(2) lower health care premiums through increased competition and choice;

(3) preserve a patient's ability to keep his or her health plan if he or she likes it;

(4) provide people with pre-existing conditions access to affordable health coverage;

(5) reform the medical liability system to reduce unnecessary and wasteful health care spending;

(6) increase the number of insured Americans;

(7) protect the doctor-patient relationship;

(8) provide the States greater flexibility to administer Medicaid programs while reducing costs under such programs;

(9) expand incentives to encourage personal responsibility for health care coverage and costs;

(10) prohibit taxpayer funding of abortions and provide conscience protections for health care providers;

(11) eliminate duplicative government programs and wasteful spending; or

(12) do not accelerate the growth of entitlement programs or increase the tax burden on Americans.

The SPEAKER pro tempore. The bill shall be debatable for 90 minutes, equally divided and controlled by the chairs and ranking minority members of the Committees on Education and the Workforce, Energy and Commerce, and Ways and Means.

The gentleman from Alabama (Mr. BYRNE), the gentleman from Virginia (Mr. SCOTT), the gentleman from Pennsylvania (Mr. PITTS), the gentleman

from New Jersey (Mr. PALLONE), the gentleman from Texas (Mr. BRADY), and the gentleman from Michigan (Mr. LEVIN) each will control 15 minutes.

The Chair recognizes the gentleman from Pennsylvania.

GENERAL LEAVE

Mr. PITTS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and to include extraneous material on H.R. 596.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Pennsylvania?

There was no objection.

Mr. PITTS. Mr. Speaker, I yield myself such time as I may consume.

I rise today in support of H.R. 596, sponsored by BRADLEY BYRNE of Alabama.

Today, the House acts, once again, to repeal ObamaCare. Millions of Americans continue to feel the harmful effects of the President's health care law in almost every corner of their lives.

Recently, I heard from a public schoolteacher who told me that many of our local schools are having trouble finding long-term substitutes for specialty classes such as art, music, and physical education. Under ObamaCare's new definition of full-time work, substitute teachers are strictly limited to 3½ days a week. Children are simply missing out on these important classes or are being pushed into packed, combined classes. Many of our local schools have already had to outsource cafeteria workers and other part-time positions. School districts are spending too much time worrying about Federal mandates rather than the best way to teach children.

Republicans have no shortage of good ideas with which to replace the President's health care law. Last session, there were hundreds of bills introduced to reform health care with more affordable choices. We will hear many of these good ideas and other reasons for repeal today, and I look forward to hearing from my colleagues. The American people continue to oppose the President's health care law, and, today, House Republicans will stand with them again.

I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield myself such time as I may consume.

I have great respect for my colleague from Pennsylvania, but I just think more and more what I am hearing from my Republican colleagues is what I call "fantasy land." This isn't the America we know.

In the past few years, since the Affordable Care Act has taken effect, so many Americans who didn't have health insurance now have it. Something like 19 million Americans who were uninsured now have health insurance. Millions of young adults have health insurance because they are able to stay on their parents' plans. There are 129 million Americans who can no longer be denied health insurance for having preexisting conditions. Seniors

have saved so much money on the prescription drugs. I could go on and on, but I don't need to.

Americans like the Affordable Care Act. It is working. We cannot go back. We cannot turn over the health care system again to the insurance companies, which are going to have skeletal plans, not provide good benefits, raise premiums to whatever they want, and not actually have any help from the Federal Government. When you repeal ObamaCare, or the Affordable Care Act, you are basically giving Americans a tax increase because they are not going to be able to get the tax credits or the subsidies that help them pay for their premiums and make those premiums affordable. This is working. This is happening. This isn't something we can just throw away.

The Republicans say—what did my colleagues say?—that the GOP has no shortage of good ideas. What ideas? Four years ago, when they first took the majority in this House, the House Republicans passed a similar repeal bill and instructed the committees to come back with alternatives. It never happened, and it will never happen again. They might have a few good ideas here and there, but they have never come up with a comprehensive plan to provide Americans with low-cost health insurance and to insure most Americans.

That is what we have done with the Affordable Care Act. We are not going to go back. We are not going to repeal. This is fantasy. The President will never sign it, and I just wish that they would stop wasting our time and would get to things that are actually going to make a difference to the American people.

I reserve the balance of my time.

Mr. PITTS. Mr. Speaker, I am pleased to yield 2 minutes to the gentlewoman from Tennessee (Mrs. BLACKBURN), the vice chair of the Energy and Commerce Committee.

Mrs. BLACKBURN. Thank you, Mr. Chairman.

Mr. Speaker, talk about fantasy. I think that it finds its root in this comment from Jonathan Gruber, who was the architect of ObamaCare:

If you had a law which said that healthy people are going to pay and sick people would get money, it would never have passed. Lack of transparency is a huge political advantage. Call it the stupidity of the American voter or whatever, but that was critical for the thing to pass.

Mr. Speaker, that is the fantasy on which this was based. It does not work. It has driven up costs. Indeed, we know that 70 of our Democrat colleagues have crossed the aisle and have voted with us to repeal different provisions of this law because it does not work. It is not making insurance more affordable. It is costing more.

One of my constituents is Emily. Her insurance was \$57 a month before ObamaCare. After ObamaCare, with the subsidies, it was \$373 a month. Another constituent, Jimmy, is saying he can't afford to offer the benefits now because

of the way ObamaCare has driven up the cost of insurance. It is offer insurance or close his business. Those are the choices. That is why we are here. It does not work, and it is time to get this law off the books.

Yes, there are lots of ideas. Mr. Speaker, just for my colleagues to know, at Energy and Commerce, we have over 100 bills that have been filed that would repeal different provisions of this law, and we are doing it because the American people have said, We are tired of this. It is damaging health care. It is returning us to the day of the old major medical when you had higher premiums, when you had higher out-of-pocket costs, and when you had fewer benefits.

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Now, our colleagues across the aisle, Mr. Speaker, may say that those are not suitable plans, but guess what? That is what ObamaCare plans are becoming. It is time to get it off the books and restore choice and option for the American people.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from Maryland (Mr. HOYER), our Democratic whip.

Mr. HOYER. This bill is about restoring choice not to have insurance, not to have the assurance that if you get sick, you are going to be able to not go bankrupt. That is what this bill is about.

Mr. Speaker, this House is about to hold its 56th vote to undermine or repeal the Affordable Care Act, which came to us, by the way, by route of The Heritage Foundation, as I think probably most of you recall.

But this vote is different than the previously full repeal votes for one significant reason. Since the last repeal vote, the health insurance marketplace has opened and is working. Over 9½ million Americans have signed up through these marketplaces for health care coverage for 2015 so far. That means that with today's vote, Republicans are choosing to take away health care coverage from millions of Americans.

This vote will also remove patient protections and cost savings reforms. To make matters worse, today's vote would also defund the bipartisan popular CHIP program that helps States cover uninsured children. So it abandons children as well.

In 2011, when House Republicans voted to repeal the Affordable Care Act, they included language that said they would replace it with something else; and I say to my friend, Mr. PITTS, Mr. Speaker, notwithstanding that, they have not done so. However, they still have failed to give us an alternative.

I urge my colleagues to vote "no."

Mr. PITTS. Mr. Speaker, I am pleased to yield 2 minutes to the gentlelady from North Carolina (Mrs. ELLMERS), a member of the Subcommittee on Health.

Mrs. ELLMERS. Mr. Speaker, I thank the chairman for this very important discussion that we are having today.

Yes, I rise in support of H.R. 596, which aims to repeal the Patient Protection and Affordable Care Act, otherwise known as ObamaCare. ObamaCare has been a costly disaster to my constituents in the Second District of North Carolina and across this country.

I have heard numerous stories, ranging from young women to senior citizens, and they all touch on the same underlying problem: ObamaCare is unaffordable and results in severe consequences.

As a nurse, I know that repeal alone is not enough because the American people need high-quality, patient-centered health care. I am so proud to be standing with my Republican colleagues and many of the Democrats that we serve with who are now going to say to the American people, not only are we against this awful law, but we are for good, patient-centered health care, and we are going to provide that plan of action for the American people to see.

We need to stand with the American people, who overwhelmingly disapprove of ObamaCare.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from Texas (Mr. GENE GREEN), ranking member of the Subcommittee on Health.

Mr. GENE GREEN of Texas. Mr. Speaker, I rise today to express my staunch opposition to H.R. 596, legislation to repeal the Affordable Care Act.

Yesterday was Groundhog Day, yet it is today's vote that really feels familiar. The House has now attempted to repeal or undermine the Affordable Care Act for 56 times. It is disappointing that the Republican leadership continues its partisan campaign to undermine the ACA and create barriers for millions of uninsured Americans having access to health insurance.

Based on the latest estimate from the Congressional Budget Office, 19 million Americans—and 20,000 in our Houston area district—would lose their health insurance this year if the ACA is repealed. These are people who would be without coverage today if it were not for the ACA.

H.R. 596 would take away critical benefits and health care coverage for hardworking families. Not only that, this bill would increase the deficit, repeal reforms that help slow the growth in health care costs, and undo basic protections that provide security for the middle class.

It is long past time to stop playing political games on health reform. We need to work to enact reforms that improve and build on the ACA for the good of the American people.

Mr. PITTS. Mr. Speaker, a lot of those people are on Medicaid and can't even see a doctor.

I am pleased to yield 2 minutes to an outstanding Member from Pennsylvania (Mr. ROTHFUS).

Mr. ROTHFUS. Mr. Speaker, I have sat here today listening both to the rule debate and the debate we are having right now, to my colleagues on the other side of the aisle who ridicule our relief efforts and joke about the number of votes that we have taken to repeal ObamaCare.

Mr. Speaker, my friends across the aisle may think this is funny, but it is no joke to the folks I represent back in Pennsylvania. It is not a joke to the mother who walked into a pharmacy and found out a drug that cost \$40 under her old plan, the one that the President promised she could keep, now costs \$700 because of the skyrocketing deductibles that she has. It isn't funny to people who have received a cancellation notice in the mail and have been forced onto plans with ridiculous out-of-pocket costs. A woman I spoke to who can't go to a doctor she has seen for 20 years definitely isn't amused by ObamaCare.

There wasn't one single Republican who voted to create the train wreck that is known as ObamaCare, and we made our opposition abundantly clear to voters before we went to the ballots last November.

I urge my colleagues to give Americans what they asked for and support this legislation. Do it for every American who was lied to about the real cost of this law. Do it for the millions who have been hurt by this law, and let's find a better way forward.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentlewoman from California (Mrs. CAPPS).

Mrs. CAPPS. Mr. Speaker, I thank my colleague for yielding.

It is not a joke. It is disheartening that here we are for the 56th time again considering a bill to repeal the Affordable Care Act.

This time it is different. This time repeal will do more than simply take away the important consumer protections that hold insurance companies accountable and make sure everyone is insurable.

This time it will actually take health insurance away from millions of families, plans they have both chosen and paid for. This time it will hit families where it hurts, raising their costs by erasing the benefits that make their insurance more affordable, as well as raising Medicare prescription drug costs.

This time small businesses who have received tax credits to make insurance affordable will lose them, leaving employees without coverage and few, if any, affordable options.

We all know that the Affordable Care Act is not perfect and there are clear areas where we could work together to build on and improve this law, but today's repeal vote would turn back time, reverting back to a system everyone agreed was broken. The American people deserve better than that from us. I ask for a "no" vote.

Mr. PITTS. Mr. Speaker, at this time, I am pleased to yield 2 minutes

to the gentleman from Michigan (Mr. MOOLENAAR).

Mr. MOOLENAAR. Mr. Speaker, this is my first speech on the House floor, and today I am here speaking because we are voting to repeal the unpopular and unaffordable Affordable Care Act.

Our Nation has over \$18 trillion in debt, and this law adds to it by spending more money we don't have. The cost of coverage subsidies alone is expected to quadruple over the next 10 years, according to the CBO.

The Federal Government is picking up the tab for Medicaid expansion, and it will eventually pass the enormous financial burden on to State budgets. In the last decade alone, Michigan has gone from one in eight residents enrolled in Medicaid to approaching one in four enrolled in this unsustainable government program.

What is more, this law has the effect of throwing a wet blanket on the economy. Small business owners say rising health insurance costs are their biggest concern, and the health insurance tax costs them \$688 per employee. School districts have cut the hours of part-time employees, and businesses can't afford to hire more employees because of the costs of mandated coverage. We have even seen colleges and universities cut back hours for student workers, and now they earn less money to pay for their classes.

Individuals, families, and businesses all face continuing uncertainty over health care coverage and its costs. The administration, alone, has made 28 changes to the law, including delaying mandates, changing verification requirements, pushing back enrollment dates because the Web site wasn't ready, and expanding waivers to deal with the cancellation of millions of health care plans.

Five years after it was signed, the President's health care law is still changing, and last November the Department of Health and Human Services proposed 35 more revisions. It is time to permanently repeal the excessive spending, the economic pain, and the continuing uncertainty caused by this law and replace it with patient-centered alternatives with lower premiums that allow individuals to choose the coverage they want. It is time to empower patients to take control of their health care choices.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentlewoman from Illinois (Ms. SCHAKOWSKY).

Ms. SCHAKOWSKY. Mr. Speaker, here is what my constituent Laurel wrote me from Wilmette, Illinois:

Thank you. I am tired of all this belly-aching about health care, so I want to share our story. We are small business owners and have a very expensive policy for our two employees, but we have been stuck with that approach because my husband and one of our kids has asthma and are therefore uninsurable.

Our health care broker just sent us all the health care information for the next year, and our yearly costs will go down if we switch to one of the ObamaCare options in

Illinois. Although we don't qualify for subsidies, it is cheaper in all scenarios. In fact, if our usage is similar to what it was the last 3 years, our costs go down 20 percent. The policy is better. Everyone in our family is now insurable. My kids who are still under 21 may be able to get dental insurance, and the out-of-pocket maximum is lowered if someone really gets sick. Wow.

She says:

These savings don't include the benefit of the no-deductible checkups and preventive drug benefits, which have already saved us \$1800 this year. Our health care broker and his partner are signing up for ObamaCare options themselves.

She says:

I would like to know what all those Republican grandstanders who have blocked action at every turn and are now wringing their hands have done for me lately.

Mr. PITTS. Mr. Speaker, may I inquire of the time remaining?

The SPEAKER pro tempore. The gentleman from Pennsylvania has 6½ minutes remaining. The gentleman from New Jersey has 9 minutes remaining.

Mr. PITTS. Mr. Speaker, at this time, I yield 2 minutes to the gentleman from Alabama (Mr. PALMER).

Mr. PALMER. Mr. Speaker, I rise in strong support of H.R. 596, a bill that would fully repeal the Affordable Care Act offered by Mr. BYRNE of Alabama.

Right now, Americans are being forced to buy a government product or pay a penalty. The Constitution mandates freedom, not the purchase of health insurance or any other product.

We all remember this promise: "If you like your health care plan, you can keep it." In 2013, a reported 4.7 million people in 32 States lost their health insurance when their plans were canceled. That is just the beginning. The Congressional Budget Office projects that 7 million more Americans will lose their health-sponsored coverage in 2016.

Americans were promised that with ObamaCare their premiums would be lower. Instead, premiums have skyrocketed. Some groups have seen their premiums increase by 78 percent. At the same time, household incomes have gone down.

Today, 4 years after the passage of ObamaCare, there are still more than 41 million people without health coverage. There are millions of people out of full-time work and millions more forced into part-time jobs.

ObamaCare must be repealed and replaced. Americans should be allowed to buy the health insurance they want and need. We need market competition between health insurance providers, and people should be able to buy their health insurance across State lines. This would result in more choices for plans and at lower costs.

We need portability so that when a person changes or loses a job, they don't lose their health insurance. We need innovative reforms for Medicaid and reforms that create incentives for controlling costs, promoting healthier lifestyle choices, and reforms that treat people with dignity.

H.R. 596 starts the process of reforming our health care system by repealing ObamaCare. This is the first step toward true affordable health care that puts people back in charge of their health care choices.

□ 1445

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from North Carolina (Mr. BUTTERFIELD).

Mr. BUTTERFIELD. Mr. Speaker, I rise in strong opposition to this bill.

This vote today marks the 56th attempt by House Republicans to dismantle the ACA. If enacted, more than 19 million people who were previously uninsured would lose tax credits and subsidies that make insurance affordable.

Members who voted for this bill are telling the American people that access to affordable, quality health care should be reserved for only those who have the means to afford it. Let me just tell you a very brief story about a man named Carlton Stevens, Jr., from my hometown of Wilson, North Carolina.

Last year was a very challenging year for the Stevens family of five as they found themselves uninsured. As Mr. Stevens and his wife found themselves between jobs and in a new town, they prioritized finding health coverage for their family.

Mr. Stevens visited the Federal Health Insurance Marketplace to search for coverage and was surprised and elated to know that he and his family qualified for a credit of approximately \$800. He and his wife were able to purchase insurance for his entire family for less than \$200.

Mr. Speaker, this bill would deprive families like the Stevens family of affordable health care in a time of need. I wonder why my Republican friends are doing this again.

Mr. PITTS. Mr. Speaker, the number one health care concern of the American people is cost. The President promised American families that they would see a \$2,500 reduction in premiums. President Obama was wrong.

According to one study from the Manhattan Institute, American families are seeing premium increases on an average of 49 percent.

At this time, I am pleased to yield 1 minute to the gentleman from Arkansas (Mr. HILL).

Mr. HILL. Thank you, Mr. Chairman, for yielding.

Mr. Speaker, I rise today in support of H.R. 596 which repeals the President's flawed health care law in its entirety and provides the Congress with a clean slate to implement the real, patient-centered health care reform that this Nation needs and deserves.

The majority of Americans are opposed to ObamaCare and its harmful intended or unintended side effects which have increased costs, decreased health care access, and lost jobs, work hours, and wages for many of our hard-working families.

This is an opportunity to recognize the flaws of mandates and a top-down approach to health care and allows us to finally consider ideas that will result in a health care system that empowers and encourages individuals to take control of and responsibility for their health care through the use of tools like health savings accounts and incentives that reward healthy behaviors.

We need targeted, transparent, well thought out reforms that acknowledge the complexity of our health care system, and with the right kind of reforms, we can get the right kind of health care that is affordable and accessible.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentlewoman from Florida (Ms. CASTOR).

Ms. CASTOR of Florida. Mr. Speaker, the Affordable Care Act is a great help to American families.

Most Americans have health insurance through their employer. The ACA provides important consumer protections for those families. They cannot end your policy if you get sick, your copayments and premiums have to go to health services and not to profits for insurance companies, and kids aged 26 or younger can stay on your own health insurance plan.

For Americans on Medicare, the ACA is saving you money. In fact, since passage of the ACA, more than 7.9 million people who rely on Medicare have saved almost \$10 billion on prescription drugs. You have new wellness checkups, and the Affordable Care Act extended the life of the Medicare trust fund for more than a decade.

Finally, before the ACA, many Americans were barred from health insurance because of a previous diagnosis of cancer, diabetes, or something else. The Affordable Care Act has been a lifeline for them because it ended discrimination and created new marketplaces for Americans to shop for the best plan for their families.

In Florida alone, my home State, 1.5 million Floridians have already signed up for a plan in the marketplace in the upcoming year. That is 1.5 million Floridians.

Please, colleagues, don't take this away. Vote "no" on this bill.

Mr. PITTS. Mr. Speaker, at this time, I am pleased to yield 2 minutes to the gentleman from Georgia (Mr. JODY B. HICE).

Mr. JODY B. HICE of Georgia. Mr. Speaker, I thank the gentleman for yielding time, and I rise in strong support of H.R. 596, the legislation that will repeal ObamaCare.

Mr. Speaker, since its passage in 2010, ObamaCare has put us on the path toward a full government takeover of the health care industry. The American people were sold on this by false promises that ObamaCare would lower the costs and increase access to care.

The first and most egregious false promise came when the President himself said:

If you like your health care plan, you'll be able to keep your health care plan, period. No one will take it away, no matter what.

In reality, some 5 million Americans have lost their plans since that time and have suffered needlessly.

Furthermore, Mr. Speaker, we were promised that premiums would go down; instead, premiums in the individual marketplace have increased by an average of 49 percent across the country. This is one of the main reasons that only 7 percent of Americans believe that ObamaCare will actually reduce the cost of care.

ObamaCare has also been a drag on the economy. The nonpartisan Congressional Budget Office has estimated that this law will reduce the full-time workforce by some 2.5 million people. The American Action Forum reported that small business wages have already decreased by \$22.6 billion a year.

Mr. Speaker, with its \$1 trillion in new taxes and \$2 trillion in new entitlement spending, we must repeal ObamaCare, and H.R. 596 does exactly that.

Additionally, we must replace this law with patient-centered, free market solutions to the problems that exist in our health care system. H.R. 596 takes the important step of directing the committees of jurisdiction to develop legislation that will do just that.

I ask all of my colleagues to support H.R. 596.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentlewoman from New York (Ms. CLARKE).

Ms. CLARKE of New York. Mr. Speaker, I rise in opposition to H.R. 596, a bill that will completely repeal the Affordable Care Act, which was signed into law in 2010 and was declared constitutionally sound by the U.S. Supreme Court.

The Affordable Care Act extends health care coverage to all Americans, regardless of their gender, health condition, or ability to pay.

Unlike other Republican repeal efforts, H.R. 596 does have a bit of a new twist. This legislation instructs the appropriate committees to draft a Republican alternative to the Affordable Care Act and directs them to include provisions that will provide people with preexisting conditions access to affordable health coverage and provisions designed to increase the number of insured Americans.

I am not sure where the Republicans have been over the past 5 years, but those two provisions are already in the Affordable Care Act which is already the law of the land. In fact, the number of uninsured Americans has steadily decreased under the Affordable Care Act to a record low of 13.4 percent by the second quarter of 2014, and Gallup's quarterly trends projected that the uninsured rate will continue to drop over all age groups.

The Affordable Care Act is good law. It should not be repealed, and that is why I vehemently oppose H.R. 596. It is another very cynical attempt to take our Nation backward.

The SPEAKER pro tempore. The Chair would inform the managers that the gentleman from Pennsylvania (Mr. PITTS) has 1 minute remaining. The gentleman from New Jersey (Mr. PALLONE) has 6 minutes remaining.

Mr. PITTS. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from Oregon (Mr. SCHRADER).

Mr. SCHRADER. Mr. Speaker, I have to say that I am very surprised to have to be here today. I thought after millions of Americans said loud and clear this past November that they wanted us to work together and find common ground, we could put divisive bills like this behind us.

When I speak to voters in my district in Oregon, none of them ask me to raise taxes on the middle class which, effectively, this bill does. None of them have asked me to let health insurance plans discriminate against women or those with preexisting conditions, something this bill does. I don't know any seniors that want to pay more for prescription drugs, something that will happen if this bill becomes law.

Nobody I speak with wants the most vulnerable children to go without health insurance which will happen if this bill goes into effect, ending bipartisan support for the Children's Health Insurance Program.

Nobody I know wants to see the deficit grow, to pass on more debt to our future generations, or reduce the solvency of the Medicare trust fund—again, something that will happen if this bill becomes law.

Mr. Speaker, I don't think my constituents are alone in this. Americans want us to stop wasting time and come together and put this partisan nonsense behind us.

I urge my colleagues to vote "no" on this bill and get our priorities in line.

Mr. PITTS. Mr. Speaker, I continue to reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to my colleague from Massachusetts (Mr. KENNEDY).

Mr. KENNEDY. Mr. Speaker, I rise today in proud support of the Affordable Care Act and the millions of Americans that have received coverage under this law.

I rise today in support of the idea that in this country, the most powerful in the world, every citizen deserves access to quality affordable health care, and I rise today on behalf of the millions of children who get health insurance through the Children's Health Insurance Program which is also at risk today.

Mr. Speaker, one in five children today are on food stamps, 16 million kids under the age of 18. For the first time in 50 years, the majority of U.S. public school students live in poverty. CHIP was designed in the 1990s to try to address these kids and make sure that they had access to health care. Since then, the uninsured rate for children has dropped from 14 percent to 7 percent.

CHIP funding expires later this year and is included in this bill. More than 8 million children will lose access to health insurance. That is 150,000 children in Massachusetts alone.

Mr. Speaker, I ask my colleagues to hear those 8 million voices and vote "no" on this bill.

Mr. PITTS. Mr. Speaker, I continue to reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. Cárdenas).

Mr. Cárdenas. Mr. Speaker, I rise today to strongly oppose H.R. 596, a bill to deny access to health care to tens of thousands of Americans with pre-existing conditions.

Americans should know that these same fear-mongering comments were made when Congress created Medicare. Today, we have millions of grandmothers and grandfathers who would not be alive today had Congress abandoned this critical lifesaving law.

I am proud to have supported the Affordable Care Act last year in the San Fernando Valley which I represent. My office helped experts sign up over a thousand families. Family after family sat there, nervous at first, but after realizing that now their family could afford to see a doctor, I personally witnessed tears of joy.

Republicans need to stop playing games with people's lives. The Affordable Care Act saves lives. ObamaCare never existed. ObamaCare is just a form of a lie. Americans need to learn that the Affordable Care Act is not what people call ObamaCare.

Millions of people will be alive today and tomorrow, and we just have to look at history in Congress to know that fear-mongering should not intimidate elected officials.

Mr. PITTS. Mr. Speaker, I continue to reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. Thompson).

Mr. Thompson of California. I thank the gentleman for yielding.

Mr. Speaker, it is said that insanity is doing something over and over again and expecting a different result. Well, here we go again, the 56th bill to repeal or undermine the Affordable Care Act.

We all understand that the majority needs to give their freshmen Members an opportunity to say that they voted to repeal ObamaCare, so let's call this what it really is: an exercise in futility.

It may make for good talking points in your districts, but it is bad for our country, and it is a waste of time and a waste of tax dollars. You are in charge with the biggest majority in decades, and this is what you decide to do with it?

Folks on my side of the aisle are willing to work with you on things like investing in roads, growing our economy, creating jobs, and even making improvements in the Affordable Care Act.

Our constituents sent us here to get something done, not to pass bills that

are never going to become law. So let's do something meaningful. Let's say "no" to this bill and get on to the work of the people.

Mr. PITTS. Mr. Speaker, might I inquire how many speakers the gentleman from New Jersey has remaining. We are prepared to close, Mr. Speaker, and I reserve the balance of my time.

□ 1500

Mr. PALLONE. Mr. Speaker, may I ask how much time I have?

The SPEAKER pro tempore. The gentleman from New Jersey has 2 minutes remaining.

Mr. PALLONE. Mr. Speaker, I yield myself the balance of my time.

Mr. Speaker, I have listened very carefully to what my colleagues said on the other side. They keep saying they are going to come up with an alternative to the Affordable Care Act, and yet not one speaker mentioned an alternative that they have, and that is because it doesn't exist.

As I said before, 4 years ago they came up with a similar repeal bill. They said they were going to instruct the committees to come back with an alternative, and they never did, and they never will.

The fact of the matter is, if you listen to my colleagues on the Democratic side, they talked about all the positive things that have occurred because of the Affordable Care Act. Millions—almost 20 million people—who didn't have insurance before now have insurance.

Preexisting conditions, out the window. How many people weren't able to get insurance before because they had cancer or they had other preexisting conditions that made it impossible for them to get insurance, and that is not the case anymore?

Kids who are on their parents' policies, seniors who benefited from the fact that now there is no doughnut hole, and they can basically get their prescription drugs. How in the world do my Republican colleagues come here on the floor and know that all these positive things have resulted because of the Affordable Care Act and just in a moment's notice say they are going to simply repeal it and not even have an alternative to come up with at any point?

It is incredible to me that they want to turn the clock back and don't understand that people have benefited greatly from the Affordable Care Act.

Well, the bottom line is that we, as Democrats, are not going to turn the clock back. We are very proud of the fact the Affordable Care Act has accomplished so much to reform the health care system, to deal with preventative care, to make changes to the health care system that are providing good quality care, good benefits at an affordable price.

The President has said that this bill is dead on arrival. He will veto it. He will take out his veto pen.

So let's not waste our time. Fifty-six votes to repeal; I hope we don't see another one. It is simply a waste of time, and I think that my Republican colleagues, hopefully, understand that.

So, if you have some ideas for the future that you want to make improvements, you want to improve quality, you want to improve access, we will listen to them. We are more than willing to work with you on a bipartisan basis.

But we are not going back to the system that existed before where the insurance companies ran the system. We are not giving it back to the insurance companies.

Mr. Speaker, I yield back the balance of my time.

Mr. PITTS. Mr. Speaker, as I said before, we have several hundred bills, a menu of options to repeal, to replace, some comprehensive, some targeted.

And I would remind the Democrats that ObamaCare cut \$716 billion out of Medicare to fund ObamaCare.

Mr. Speaker, I am pleased now to yield 1 minute to the gentleman from California (Mr. MCCARTHY), our great majority leader.

Mr. MCCARTHY. I thank the gentleman for yielding.

Mr. Speaker, today the House will vote on a bill that we have voted on many times in this Chamber.

Mr. Speaker, you want to know why?

The answer is very simple. The law is a disaster. We still can't afford its costs, and the American people still don't want it.

The House, on both sides, is intimately tied to the will of the people. We talk to, we listen to our constituents every day. In our districts, we listen to them at meetings, in the grocery store, at the gas station, and in our houses of worship. And every 2 years our neighbors either send us back to Washington to fight for them or send someone else.

In the most fundamental way, their priorities are our priorities because we directly represent them. When it comes to ObamaCare, the people could not be clearer.

Mr. Speaker, you know what they have said?

They said, We don't want it. We don't want higher premiums. We don't want to be forced to buy all sorts of coverage that we don't need and can't afford.

Mr. Speaker, they have also said, We don't want to lose our doctors, as millions have. We don't want to give control over our health care decisions to Washington bureaucrats. They have simply said, We don't want it.

But for years, the President hasn't listened.

Now, House Republicans have three priorities. We want to increase freedom, promote opportunity, and hold government accountable.

ObamaCare is against all those goals with its outdated, top-down approach. It limits opportunities by destroying the 40-hour workweek and saddling Americans with more costs. It empow-

ers a government that mismanaged the VA and gives them even more control over American health care systems.

We need a new system. We need a system that puts the patients first, one that controls costs through competition and expands coverage by choice, not coercion. That is the system the House is developing right now.

So if you ask why we are voting to repeal this law again, we are doing it for the people.

Mr. Speaker, I ask that every Member of this House who has a direct relationship with their district to listen. But, at the end, have the wisdom to listen but the courage to lead and vote "yes."

The SPEAKER pro tempore. The time has expired for the Energy and Commerce Committee.

The Chair recognizes the gentleman from Texas (Mr. BRADY).

Mr. BRADY of Texas. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise today in support of H.R. 596, legislation to repeal the President's controversial and expensive health care law, a law that put 159 Federal agencies, commissions, and bureaucracies in between you and your physician.

Mr. Speaker, today the House of Representatives again acts to repeal the costly mistake known as the Affordable Care Act. In the years since the law's passage, too many Americans have discovered the reality behind the President's promises.

Americans lost plans that they liked and wanted to keep. They saw their premiums soar, and their deductibles, and they discovered their family doctor was suddenly out of network and unaffordable.

They saw their hours reduced at work, and hiring slowed as a result of the law's \$1 trillion in new taxes. They realized that, under the law, more work doesn't necessarily mean more pay.

They saw their tax dollars risked on insurance organizations that are now failing. They tried, frustratingly, to navigate the complicated health care site to get help buying what turned out to be more costly coverage. And soon, millions of unsuspecting Americans may learn that errors beyond their control could leave them on the hook to the IRS.

Today's action is not simply opposing the Affordable Care Act. It is about standing up for our families, patients, small businesses, and local health care providers who have been hurt by this law.

The American people deserve better than this. We need to start over, and that begins with the full repeal of the President's health care law.

But we can't just stop there. We also have to continue to advance our own patient-centered solutions to the problems in health care, solutions that actually lower the cost of health care; to make our current system more fair; to



protect the most vulnerable; and put our crucial safety net programs on a path to sustainability for the long term.

I am pleased, Mr. Speaker, that this bill will allow us another opportunity to put forward these ideas, and I encourage my colleagues to support this bill.

Mr. Speaker, I reserve the balance of my time.

Mr. LEVIN. Mr. Speaker, I yield myself such time as I may consume.

(Mr. LEVIN asked and was given permission to revise and extend his remarks.)

Mr. Speaker, well, the majority leader says we need a new system. This has been for 4 years their new system—a total blank page.

Their problem is that it is working, that health care is working. It is working for these people: 12 million uninsured Americans who got coverage; over 10 million enrolled in Medicaid and CHIP; 3 million young adults, 3 million who are now covered because of their parents' health policy.

It is working. It is working for the 129 million Americans with preexisting health conditions, so many of whom were out in the cold; for 105 million Americans who no longer have a lifetime limit or an annual limit; and for seniors who got the benefit of filling the doughnut hole.

There is some reference here to increased health care costs. It is a lie. Health care costs have been going down. It is a fib. It isn't true.

I think what bothers Republicans most of all is that it is working, and their ideology is blind to success, or they don't want to see it.

We are going to vote "no." What is this, the 56th time? We have lost track of how many times we voted "no."

We are voting "no" because of the millions of people who were left out by our insurance coverage, who now have the decency of health care coverage and the protection of health care coverage.

We are proud of health care reform, so we stand up to say "yes" to it by voting "no."

Mr. Speaker, I reserve the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentlewoman from Tennessee (Mrs. BLACK), one of the health care leaders on the Ways and Means Committee.

Mrs. BLACK. I thank the gentleman for yielding.

Mr. Speaker, as a nurse for over 40 years, I saw how decisions in Washington affected the real people. I witnessed the effects of Congress' action on my patients' faces and in their billing statements.

I understand better than most the need for health care reform, but ObamaCare was never the way to do it. Just ask the 16,000 Tennesseans who lost their health insurance through Cover Tennessee, despite the President's promise "if you like what you

have, you can keep it," or the 11 million small business employees who CMS says will see their premiums spike because of the law.

The results are in. ObamaCare was a mistake that hurts the very people it pretends to help. And that is why, today, I will vote to repeal this law once and for all.

Mr. LEVIN. Mr. Speaker, I yield 1½ minutes to the distinguished gentleman from New York (Mr. RANGEL) who has worked on health care for how many years, Mr. RANGEL?

Mr. RANGEL. A million and one.

Thank you for this opportunity to try to figure out what is going on on the floor today. Normally, Republicans are rational, intelligent people, and that is the reason why they keep talking about ObamaCare.

It is clear to me that we are not voting on ObamaCare. I haven't seen ObamaCare in any of the papers we have today, so they must be saying that they want to repeal the Patient Protection and Affordable Care Act. That makes it easier to understand what they want to do.

They want to repeal health care, and they want to replace it with, well, they want to—I don't know what they want to do, quite frankly, but I know they want to get rid of this.

I think we have reached the point that we have exhausted the legislative process. I have figured it out. This Senate is prepared to join with them in this insanity. The only thing missing is the President of the United States.

Now, they must have a plan how they are going to pick up two-thirds of this House and two-thirds of the Senate to tell the world: We don't want Americans to have health care.

Now is the time for the spiritual leaders to come in, because I have been reviewing the Bible, and Christians, Jews, everybody says that we have a moral obligation, far beyond our legislative responsibility, to give the sick an opportunity to get well, to allow children the opportunity to breathe.

And I know the concerns for the unborn that we all have. But what about the born, the aged, the disabled?

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. LEVIN. I yield the gentleman an additional 30 seconds.

Mr. RANGEL. So collectively, we all have to—in God we have to trust. This means we have given up on the process—55, 56 times. It is time to trust in God.

So I am calling upon all of those solid voices there that were waiting to see whether sanity could ever come to the well of this House, and I think we have proven today, don't count on us, God. We need your help. And only God can get us out of this rut.

Thank you for the opportunity.

□ 1515

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Minnesota (Mr.

EMMER), one of the new Members of the House of Representatives.

Mr. EMMER. I thank the gentleman from Texas, Representative BRADY, for his leadership on this issue.

Mr. Speaker, I rise today to address the urgent health needs of this Nation. I asked my constituents to share with me how ObamaCare has affected them, and I want to share a few of their stories with you today.

Troy, from Norwood Young America, wrote that his family's premium went up and coverage went down, drastically affecting the cost of his son's hearing aid.

Brian, from Albertville, said his wife's mental health clinic has steadily lost clients due to regulations.

Today, Congress will vote to get rid of this fundamentally flawed and unworkable law, but this cannot be for show. It is not enough for Congress to simply be against ObamaCare. We need to offer alternatives. By offering market-based, consumer-focused reforms, we can find real solutions, and I am committed to working with my colleagues to get it done. It is time to stop playing party politics with the public's health.

Mr. LEVIN. I now yield 2 minutes to the gentleman from Washington, Dr. McDERMOTT.

(Mr. McDERMOTT asked and was given permission to revise and extend his remarks.)

Mr. McDERMOTT. Mr. Speaker, I feel like I am telling a story told to children. The story to the children is this:

When President Obama became President, most people didn't live in the house of health. There were 30 million people who were out in the street who had nothing. So President Obama built them a house and said everybody can live in the house of health and have health care.

Their next-door neighbor didn't like the house, complained about the house, said there was everything wrong with the house, and has tried 55 times to blow the house down, just like the Big Bad Wolf in the "Three Little Pigs." This time, they have come with a bulldozer, and they want to knock the house down and put everybody out in the street again.

Now, this would be not so silly if it wasn't for the fact that they have no plans to build anything for the people to live in. They have talked for 5 years: We have plans. We have a committee. We are going to have plans here any day now.

The fact is they have no plan for the people. They simply say to the American people: We want to knock down your house of health. Your preexisting condition will now keep you from health care. Your kids are off before 26. All of this is going to happen because we don't think you should have a house of health in this country.

They have no plan, and they know it, and they are ashamed of it. But they can't stand the fact that Mr. Obama

built a house that covered everybody. It is a glorious creation.

Is it perfect? No.

Did they come over with a hammer or paint or something to change it? No.

It was always: Knock that house down.

Folks, vote “no.” Keep the house up.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentlewoman from California (Mrs. WALTERS), a businesswoman and former State legislator who understands the harm of the Affordable Care Act.

Mrs. MIMI WALTERS of California. Mr. Speaker, over 4 years ago, ObamaCare was signed into law and sold to the American people on numerous false promises. Americans were promised that premiums for a typical family would go down. The President told Americans, if you like your health care plan, you can keep it, and, if you like your doctor, you can keep your doctor. However, that was not true, and now many Americans are grappling with a very different reality.

As a result of ObamaCare, millions of Americans have seen their health care plans canceled, families are finding that they may not get to keep the doctor that they like, and premiums in the individual market are increasing by 41 percent in the average State.

Mr. Speaker, the American people deserve better. Instead of putting the Federal Government in the driver's seat of our Nation's health care decisions, we need solutions that will protect the doctor-patient relationship, foster economic growth, and empower patients by giving them the choice and control.

Today, I am pleased to stand in support of H.R. 596, legislation that would not only repeal ObamaCare, but would instruct the House to come forward with a patient-centered, free market alternative.

Mr. LEVIN. Mr. Speaker, I now yield 2 minutes to the gentleman from New Jersey (Mr. PASCRELL), another distinguished member of our committee.

Mr. PASCRELL. Mr. Speaker, I rise today in opposition to H.R. 596.

You would think that if my friends on the other side cobbled together all of the time they have spent trying to undermine the ACA, they should have been able to come up with an alternative for this law, the law they can't find anything good to say about, but I am not holding my breath for that.

While we have been here 55 times before, including my Republican colleagues shutting down the government over ACA—let's not forget that. You shut the place down in trying to stop ACA. Oh, by the way, you don't know how much that cost, the billions of dollars in jobs. But we will overlook that today. Today is different because they are now repealing the law after the major coverage expansion provisions have gone into effect.

Today's vote to repeal the ACA means taking away health insurance

for the 19 million Americans who receive coverage under ACA, including 213,000 people from my home State of New Jersey; second, ending the tax credits 85 percent of Americans with coverage through the exchange are using to help offset the premiums and requiring them to pay back the tax credits they already received; and third, among the many reasons, seniors losing the new Medicare benefits the ACA created, such as lower drug costs and free preventive services.

I want to be there when you tell the seniors in your district that are covered under this plan that they don't have it anymore. I want you to tell them how much it is going to be increased on prescription drugs. You stand there. Don't pontificate on this floor. Go to your district. Tell the people what you are doing.

Before the ACA, many people were paying for plans that didn't provide them with the coverage they needed. The plans they purchased had high out-of-pocket costs and artificially low caps on coverage.

The SPEAKER pro tempore. The time of the gentleman has expired.

The Chair would remind Members to address their remarks to the Chair.

Mr. LEVIN. I yield the gentleman 30 seconds.

Mr. PASCRELL. Through the Chair, my friend from Texas—I call him my friend, I think, sincerely—I agree with him that we want results from what we are spending on health care. We want to see the results, results-oriented, absolutely. That is what health care reform and the ACA are all about.

We are removing ourselves from the fee-for-service, which had made patients prisoners of hospitals. The gentleman from Texas agrees with me on that, I believe. Make the ACA better. Help us improve it for a change. The gentleman knows there are good things in this bill and in this law. Help us make it better for the American people.

Mr. BRADY of Texas. Mr. Speaker, I am proud to yield 1 minute to the gentleman from North Carolina (Mr. ROUZER), a new Member of Congress and a former State legislator who helped lead the fight against the damage caused by the Affordable Care Act.

Mr. ROUZER. Mr. Speaker, one of the best things we can do in Congress to create an environment for more good-paying jobs is to repeal ObamaCare.

Under ObamaCare, health insurance premiums have gone up, access to quality care has gone down, and doctors all over this great land are plotting their exit strategies—not to mention the chilling effect this law has had on our economy, resulting in lost jobs all over America.

It is a simple fact that if you are going to get the best product for the lowest possible price, you must have competition and transparency. We have very little of either in the health care sector today, and ObamaCare, with all

its rules and mandates, has made it that much worse.

If we want to do right by the American people, we should allow individuals and families to buy insurance across State lines, let small businesses and other groups establish associated health plans so they can pool their resources and have the leverage to buy health insurance at lower rates, and we should let individuals and families set aside money in health savings accounts tax free.

Mr. Speaker, those are just a few of the simple, commonsense steps we can take to help drive down costs. The American people know that ObamaCare is not the answer, and those seeking a good-paying job definitely know it. So let's do what is right. Let's repeal this disastrous law and start anew.

Mr. LEVIN. It is now my pleasure to yield 2 minutes to the gentleman from New York (Mr. CROWLEY), a member of our committee and also the vice chair of our Caucus.

Mr. CROWLEY. I thank the gentleman for yielding.

Mr. Speaker, I heard my friend, the gentlewoman from Tennessee (Mrs. BLACK), as she was finishing her remarks and leaving, she said—I somewhat quote—she hopes this repeal of the ACA will, once and for all, be the end of the ACA. “Once and for all.”

If they have done it once, they have done it 56 times. This is not one time. It is 56 times they have wanted to repeal the Affordable Care Act—56 times.

My colleagues on the other side of the aisle are probably pretty proud of themselves. After all, Joe DiMaggio, he had a 56-game hitting streak, something people say will never be equated again.

But unlike “Joltin’ Joe,” this one isn't a streak of hits. It is a streak of losses, a streak of strikeouts for the American people. It is a streak of being willing to sacrifice the health and well-being of your constituents just to make a cheap political point.

This majority is apparently ready and eager to actually take away health coverage. As my friend from New Jersey (Mr. PASCRELL) said, try explaining this to your constituents back home. Take away the health coverage that people have purchased and have been using for over a year.

They would make people, particularly seniors, pay back the tax credits that helped them afford the coverage in the first place. They would ask their seniors to go back to pinching pennies to afford prescription drugs and even force them to repay the rebate check they received for their high prescription drug costs. They would put insurance companies back in charge of what kind of health care you can get and when you can get it and how much it is going to cost.

That is not a win to me. That is not something to celebrate. It is something you should all be ashamed of.

Mr. Speaker, you are no Joe DiMaggio. Some streaks put you at the



top. This one puts you at the bottom. And, unfortunately, it puts the American people on the bottom as well.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Missouri (Mr. SMITH), a new member of the Ways and Means Committee, who has quickly become a leader on health care issues.

Mr. SMITH of Missouri. Mr. Speaker, we have heard the comment numerous times, "If you like your health care, you can keep it," what the President had said. Mr. Speaker, we know that that was not true. I would like to give you an example of just one of thousands that I have had from my district.

This comes from Frank. When he contacted our office, he said:

My first personal introduction to ObamaCare was a cancelation notice on December 31, 2014.

He said:

I wasn't canceled for numerous claims or because of my health. I was canceled because of ObamaCare.

Let me tell you, he lost his health insurance; and this is the change from his current health insurance that he was supposed to keep to now what he has to have. His current policy premium was \$237.86. His new premium is \$531.89, an increase of 123.6 percent. His deductible on his old policy was \$2,500. His new policy deductible is \$6,350. His copay on his prior policy was a zero copay within the network. His new program has a 40 percent pay above his deductible.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. BRADY of Texas. Mr. Speaker, I yield the gentleman an additional 30 seconds.

Mr. SMITH of Missouri. I thank the chairman.

So let's look at it. If you have a \$30,000 medical procedure, under his old insurance plan, he had a \$2,500 deductible. Under this new plan, with his \$6,350 deductible plus the 40 percent on top of it, he is going to be out \$15,810.

This is what my constituent Frank wrote:

ObamaCare is clearly the biggest, most costly lie that has ever been forced upon me by the Federal Government. It should be entitled what it is, the "Most Ridiculously Unaffordable Health Care Act."

Mr. Speaker, that is why I am standing here today with my colleagues asking for a vote on H.R. 596 to repeal the most ridiculously unaffordable health care act.

Mr. LEVIN. Mr. Speaker, how much time is there remaining, please?

The SPEAKER pro tempore. The gentleman from Michigan has 4 minutes remaining, and the gentleman from Texas has 7 minutes remaining.

Mr. LEVIN. I reserve the balance of my time.

□ 1530

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Pennsylvania (Mr. KELLY), a businessowner who has pro-

vided health care to his workers and is a leader on the Ways and Means Committee.

Mr. KELLY of Pennsylvania. Mr. Speaker, I rise in strong support of H.R. 596 because I think it is time for everybody that sits in this House to listen to the American people. This is America's House. This is the House of Representatives. It is not the Republican Party who disapproves of the Affordable Care Act. It is the American people.

Mr. Speaker, it doesn't matter what poll you look at, whether it is Quinnipiac, Rasmussen, CBS, FOX News, Associated Press, Gallup, or Pew Research. Overwhelmingly, Americans are saying resoundingly: We do not like this bill. We disapprove of this bill.

To continue to say that somehow we are taking something from somebody, wait until the tax season hits. I am talking to people back home that do tax preparation. They are already looking at—they are at just day two of tax preparation; and, my goodness, what we were told was a lie.

Mr. Gruber could not have been more truthful when he said:

Look, we relied on the stupidity of the American people. We lied to them to get this passed.

Mr. Speaker, where I am from, you are allowed to make an honest mistake, but you are not allowed to outright lie to people. They will never forgive you for that.

It is time to repeal this horrible piece of legislation that got passed through lies. It didn't get passed through honesty. I think it is very dishonest to sit here today and say that somehow the Republicans are trying to do something to hurt the American people when the American people speak out and a great majority of them disapprove of this law.

Mr. LEVIN. Mr. Speaker, I reserve the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from North Carolina (Mr. PITTENGER), a small business person and a dynamic Member of our House of Representatives.

Mr. PITTENGER. Mr. Chairman, thank you for yielding the time.

Mr. Speaker, I rise today in support of H.R. 596 to repeal the Affordable Care Act. I would ask my colleagues on the other side of the aisle: If this ObamaCare is so good, then why am I hearing so much from my constituents that they can't keep the insurance plans that they liked?

Many have seen their premiums skyrocket, and too many that need help have fallen through the cracks because of a flawed system where ObamaCare picks winners and losers at the expense of the American taxpayers.

Mr. Speaker, today's vote on repeal is an important first step. We will replace ObamaCare with patient-centered reforms, increasing competition and lowering costs by allowing insurance to be sold across State lines, ensuring

portability, and safeguarding individuals with preexisting conditions, all by providing freedom of choice, not more fines and taxes.

Mr. Speaker, ObamaCare is a train wreck. I urge my colleagues to support today's repeal and join me in working toward a commonsense replacement.

Mr. LEVIN. Mr. Speaker, I reserve the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Florida (Mr. YOHIO), a veterinarian involved deeply in health care issues.

Mr. YOHIO. I appreciate you, Mr. Chairman.

Mr. Speaker, I stand in support of H.R. 596. The ACA was passed not in open, transparent government; it was passed with not one Republican's support behind it.

We hear on the other side how we are repealing it again. I think you ought to take heed to that notice that the American people sent the largest majority of Republicans back to Congress primarily to repeal this bill.

Mr. Speaker, I have seen my own story. My family's policy—my wife's, our kids', and mine—got canceled because of ObamaCare, and through the House exchange as a Member of Congress, my premium went up \$870 extra a month. That is almost \$11,000 extra it is costing me with decreased coverage and increased deductibility, and the price went up. It was a fabrication that the prices would go down.

If this is happening to me, it is happening to everybody around America, which leads to the quality of our lifestyle decreasing, and health care is not improving because the majority of the people getting care through this are on the Medicaid system.

If you look out at the outcome around the world, our Medicaid health system is at the bottom, and that is why we need to repeal this bill and replace it with reforms we have.

Mr. LEVIN. Mr. Speaker, we may have one additional speaker who is not here yet, so I reserve the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I yield myself 1 minute.

Mr. Speaker, we have heard a lot about 56, 56 times we have voted to repeal or defund this bill, but think about the hundreds of times this White House and our Democrat colleagues have tried to force tax increases on families and small businesses.

How many hundreds of times have they tried to force global warming mandates that only drive up energy costs? How many hundreds of times did they force red tape down our local businesses so that they can't possibly survive? How many millions of people have been forced into the health care plans they don't want and forced into higher monthly premiums, higher deductibles, and they can't see their doctor or their hospital or their provider?

Mr. Speaker, these numbers matter. We can do better.

Mr. Speaker, we are ready to close, so if the ranking member would like to proceed, I would reserve the balance of my time.

Mr. LEVIN. Mr. Speaker, I yield 2 minutes to the gentleman from Washington (Mr. McDERMOTT).

(Mr. McDERMOTT asked and was given permission to revise and extend his remarks.)

Mr. McDERMOTT. Mr. Speaker, it is hard to conceive of a democratic society in which everyone does not have health security. When you look across the face of the Earth, every industrialized society on the face of the Earth has given health security to their people. They have had their own plan. The Germans had their plan, the Japanese had their plan, the British had their plan, and the Canadians—everybody has had their own plans.

Now, what we are arguing about here today is the President brought a plan to the Congress and tried to work with the other side, but they said: No, no, no, no.

So we passed a bill. Now, there isn't anybody in this business who has done any work in any legislative body who believes that you can write a perfect piece of legislation. You always have to make changes in it. You find things in it that need to be changed, and we have had no help whatsoever of bringing out the kind of changes that would make sense to make this bill work for all Americans.

Mr. Speaker, when you get sick, you are not a Democrat. When you get sick, you are not a Republican. You are not in the Tea Party, and you are not on the left. You are just sick, and you want some help. That is why this bill is way beyond partisan politics.

Mr. Speaker, I had a conversation with Bill Frist. About a year and a half ago, he wrote an editorial in which he said: Don't repeal, fix.

I called him up and said: You and I ought to work together and see if we can't work with the Republican caucus. Maybe you can get into them. They won't talk to me about working together.

He said: Well, I will do what I can.

But we never got there. Everybody knows that you do not want to have a situation tomorrow where you have a preexisting condition and you have no health insurance. That is the kind of thing you are creating by repeal. It is just a bad bill. Just put it aside, and let's work on it.

Mr. LEVIN. Mr. BRADY, are you ready to close?

Mr. BRADY of Texas. Mr. Speaker, how much time do we have remaining?

The SPEAKER pro tempore. The gentleman has 3½ minutes remaining.

Mr. BRADY of Texas. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Virginia (Mr. BRAT) to speak about health care and the Affordable Care Act.

Mr. BRAT. Thank you, Mr. Chairman.

Mr. Speaker, I rise in support of repeal. ObamaCare came with many

promises, but the American people are finally getting the bill in the mail, and they don't like what they see.

We were promised lower costs, but we have seen most premiums and deductibles only skyrocket. Almost nine out of 10 people who buy insurance on the ObamaCare exchange need a government subsidy just to afford it.

Mr. Speaker, as I have traveled my district, I have talked with countless small business owners who think of their employees like family, and they already provide health care coverage for their fine workers; but now that ObamaCare is forcing them to buy more expensive insurance, many are having to lay off their own employees or convert them to part time to avoid these skyrocketing costs.

At a time when we should be growing the economy, ObamaCare is forcing businesses to lay off people, cut their hours, and cut off their health care coverage. Health care in America certainly had problems before this law, but ObamaCare has been a cure worse than the disease.

Mr. LEVIN. Mr. BRADY, are you ready to close?

Mr. BRADY of Texas. In a moment, sir, yes, sir. So if you would like to close, we will follow.

Mr. LEVIN. And then you will close?

Mr. BRADY of Texas. Yes, sir.

Mr. LEVIN. I yield myself the balance of my time.

Mr. Speaker, I insert in the RECORD a Statement of Administration Policy.

EXECUTIVE OFFICE OF THE PRESIDENT,  
OFFICE OF MANAGEMENT  
AND BUDGET,

*Washington, DC, February 2, 2015.*

STATEMENT OF ADMINISTRATION POLICY  
H.R. 596—REPEALING THE AFFORDABLE CARE  
ACT

(Rep. Byrne, R-AL, and 48 cosponsors)

The Administration strongly opposes House passage of H.R. 596. The House has now attempted to repeal or undermine the Affordable Care Act more than 50 times. H.R. 596 would take away critical benefits and health care coverage from hard-working middle class families. In addition to taking away Americans health care security, the bill would increase the deficit, remove policies that have helped slow health care cost growth and improve the quality of care patients receive, and detract from the work the Congress could be doing to further job creation and economic growth.

The Affordable Care Act is not only working, it is hilly integrated into an improved American health care system. Discrimination based on pre-existing conditions is a thing of the past. And under the Affordable Care Act, we've seen the slowest growth in health care prices in nearly 50 years, benefiting all Americans.

Repealing the Affordable Care Act would mean that Health Insurance Marketplaces where millions of Americans now compare private insurance plans and get tax credits to purchase them would shut down. Tax credits for small business owners who cover their employees would be taken away. States would lose substantial Federal assistance under Medicaid to provide coverage for the neediest Americans. According to the most recent projections by the Congressional Budget Office (CBO), 27 million Americans are expected to gain coverage due to the law.

Repeal will likely result in most of these individuals remaining uninsured or losing their insurance altogether. An estimated 10 million Americans gained coverage during 2014, and repealing the law would erase most of these coverage gains and strip these Americans of the security and peace of mind they now have.

Further, repealing the health care law would have implications far beyond Americans who have or will gain insurance.

More than 250 million Americans with insurance private insurance, Medicare, and Medicaid would lose the benefits and protections they receive under the health care law. Insurance companies would no longer have to cover as dependents millions of young adults who have been able to stay on or sign up on their parents' plans. Lifetime limits and restrictive annual limits on coverage could be reimposed. Women could be charged more than men and up to 129 million Americans with pre-existing conditions would be at risk of not being able to access or afford health coverage. Policies that promote efficiency and accountability in health care and health insurance would be erased.

Reforms that strengthen Medicare's long-term finances also would be repealed. Seniors also would lose the more generous prescription drug coverage provided under the health care law, as well as free preventive care, and Medicare's Hospital Insurance Trust Fund would become insolvent years earlier. Moreover, by repealing these reforms to Medicare and other reforms that encourage doctors and hospitals to provide efficient, high-quality care, the legislation would drive up costs and worsen patient care throughout our health care system.

CBO has previously estimated that repealing the health care law would add more than \$100 billion to the deficit over the ten years ending in 2022, and more than \$1 trillion in the following decade. This not only hurts the Government: it hurts State and local economies, job creation, and the Nation's long-term prosperity.

The last thing the Congress should do is reflight old political battles and take a massive step backward by repealing basic protections that provide security for the middle class. Right now, the Congress needs to work together to focus on the economy, helping middle-class families, and creating jobs.

If the President were presented with H.R. 596, he would veto it.

Mr. LEVIN. Mr. Speaker, this came from the President. The President said, when he ran for office, "Yes, we can." He came here and eventually secured a majority to pass a bill to rectify 75 years of inaction, 75 years for Americans without health care by the millions, and so we did it.

Mr. Speaker, the Republicans have said, "We will," but they never have. We have never seen a bill that addressed this issue comprehensively. Now, they are on the run because millions and millions of people have now benefited for a variety of reasons who never had a single hour of health care for themselves or their children. Now, the Republicans say, "We will come up with something." It is too late.

Health care reform is here to stay. We can improve it, but Republicans will never destroy it. The American people know it is complex, but they know their health needs. We responded. We responded.

That should be and is respected, not the disrespect of coming here 56 times

to say “no” when they have never come up with anything.

Mr. Speaker, I yield back the balance of my time.

Mr. BRADY of Texas. Mr. Speaker, I yield myself such time as I may consume.

Frightened—in the days before this health care law was brought to the floor, Democrats were meeting in the White House in secret, cutting special deals, trying to find a way to pass this bill because they were frightened that if they did it in the public, out where the people could see what they were creating, that they would fail.

The night they brought it to the House floor, they were frightened that the American public would know what was in it. They brought it to the floor, and literally no one on this floor knew what was in this bill. They were frightened about what the American public would believe.

Since it has passed, frankly, too many Americans are frightened by what they have been exposed to, which is forced into health care plans. They had good ones in their business, and now, they are forced into ones that cost more, the deductibles have soared, and they can't see their local doctor or go to their local hospital or even pay for medicines for their children because of this health care plan.

Democrats at the time didn't allow a vote on any other alternative—no ideas, no options—because they were frightened the American public could see there is a better way.

The question today, Mr. Speaker, is: Can we do better? Can we do better than this law? Yes. It has helped some but has hurt so many more.

Today is about taking the first step to allowing a better option for American families, providers, and patients by first repealing this controversial and troubling law and then bringing to the floor—directing our committees to bring a better idea to the floor so that the American public has a chance for real, affordable health care that is directed toward them—not Washington—that goes with them from job to job and State to State, home to raise a family or to start that small business, one that is tailored to them, not Washington.

Mr. Speaker, this law is about not top down, but bottom up; and it is long overdue. I support and strongly urge repeal of the health care law and passage of this bill.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate by the Ways and Means Committee has expired.

The Chair recognizes the gentleman from Alabama (Mr. BYRNE).

□ 1545

Mr. BYRNE. Mr. Speaker, I yield myself such time as I may consume, and I rise today in strong support of H.R. 596.

By now, we have heard all the stories. From canceled plans to higher

deductibles to longer wait times at your doctor, ObamaCare is full of broken promises. Everywhere I go in southwest Alabama, I hear a different story about how this law is having a negative impact on families, small businesses, doctors, and hospitals.

The problems aren't just in Alabama. Nationwide studies show that under ObamaCare, individual premiums have gone up by an average of 49 percent and deductibles have skyrocketed for the average American family to the point where many people can't afford to pay their deductibles. How is that affordable?

Even worse, only 7 percent of Americans believe that this health care law will reduce their health care costs. Seven percent—that is astonishing.

I don't believe ObamaCare can be fixed through piecemeal reforms. I think the only way to truly get rid of this harmful law is to repeal ObamaCare in its entirety. For the first time, Republicans now have control of the Senate, and Senate Democrats can no longer stand in the way of having this legislation brought up for a vote.

This also marks the first full repeal vote since the law has been in implementation. Right now, American families are sitting around their kitchen table to do their taxes and realizing yet another area where this law has caused a confusing maze of requirements that must be properly navigated in order to avoid government penalties. And we have been told that millions of Americans will have to pay penalties.

We were told we would like the law once we found out what was in it. The opposite has proven to be true. We were told that we could keep our health care plans and keep our family physicians. That is also not true. The more we learn about this law, the less it makes sense.

Today's vote is not just about getting rid of ObamaCare, it is about charting an appropriate path forward.

My legislation instructs the appropriate House committees to move forward with alternative solutions to improve our health care system based on patient-centered reforms that aren't run by the Federal Government. I look forward to being a part of that process.

Mr. Speaker, I am proud to champion this legislation on behalf of families in southwest Alabama and all across America who have been negatively impacted by this law, and I urge my colleagues to vote “yes” on H.R. 596.

I reserve the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, I yield myself such time as I may consume, and I rise in opposition to H.R. 596.

As the new ranking member on the Committee on Education and the Workforce, I know that protecting access to affordable health care for America's workers and families is a high priority. Despite scare tactics and misinformation, the bottom line is that the Affordable Care Act is work-

ing. Perhaps those who want to repeal the Affordable Care Act have a short memory. It is important to remember why the Affordable Care Act was passed in the first place.

Before the ACA, employer-provided coverage was shrinking. More and more employers were dropping coverage altogether. There were months in 2008 and 2009 when 14,000 people a day were losing their health insurance because employers were not providing it and because it was above their ability to pay. From 1999 to 2010, the cost of premiums for employer-provided health insurance increased by 138 percent while workers' earnings only went up around 40 percent. And those who were employed were often locked into their employment for fear of losing their health care insurance because even though they wanted to retire, they couldn't get insurance somewhere else, and so they were stuck in that job.

Every American family with insurance had to pay a hidden tax of approximately \$1,000 per family for the cost of paying for those without insurance who would go to the hospital and not pay, and so when they went to the hospital, they would have to pay a little extra. That little extra was about \$1,000 per year for every family with insurance. This was the reality that American workers and their families faced before the passage of the Affordable Care Act. We should not go backwards.

Today, thanks to the ACA, workers are enjoying the peace of mind that they have options. If employer-provided coverage is not available, they can enter the marketplace. If it is available, they have the security of new consumer protections such as the requirement that at least 80 percent of the premiums be spent on actual health care, not corporate jets and CEO bonuses. And we ended insurance practices such as caps on payments that would only pay so much overall and then you are on your own, or so much for your lifetime and then you are on your own. And cancellations where they could just arbitrarily cancel your insurance after you have paid premiums year after year. You get sick, and they check and just want to cancel your premium. Those abuses can no longer take place.

Employers will also suffer under a repeal. In 2014, premiums for employer-provided health care grew at the lowest rate in 15 years. If the ACA is repealed, many employers could again be charged health-related premiums, so if they have a few sick employees, they will see their premiums skyrocket. The vast majority of large employers who provide health insurance to their employees may suffer an increase in premiums due to the return of the hidden tax, the cost shifting of uncompensated care.

And when employees leave a job, they are on their own to get insurance, if they can, because there was a prohibition that they could deny people with

preexisting conditions. So if you have a preexisting condition and leave your job, who knows what is going to happen.

In addition, small employers would suffer since all small group market reforms, including rating reforms, would disappear. Small employers used to pay 18 percent more in premiums than large businesses, on average. ACA leveled the playing field so now they are paying rates like everybody else. If you repeal the Affordable Care Act, they are up another 18 percent, where it was before.

Now we have heard all of the statistics: over 3 million uninsured young adults have access to health insurance through their parents' policies; 8 million senior citizens in the so-called Medicare doughnut hole have been getting relief and have saved billions. Twelve million more Americans have health insurance because of the Affordable Care Act.

These numbers represent real people, and these real people would lose access to their benefits if the Affordable Care Act is repealed. Those trying to repeal the law should be honest to seniors about what would happen to their free preventive care in the absence of the Affordable Care Act. They should explain to young adults that repealing the law would kick them off their parents' policies. They would have to explain to millions of Americans who only have insurance because of the Affordable Care Act—many for the first time in their lives—why they will now have to go without coverage.

And while the Republican majority continues to talk about repeal, we should be talking about the progress we have already made and how we can continue to move in the right direction. So when the Republicans talk about replacement of legislation, it is important to note that there is no meaningful replacement proposal on the table. Delaying the effective date of this repeal for 180 days does not make a meaningful replacement any more plausible or likely.

This is the 56th attempt to repeal or undermine the Affordable Care Act. This is a distraction, and I hope the Republican majority will refocus efforts on real policy solutions for the American people, American families, and workers.

I reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Louisiana (Mr. SCALISE), the majority whip of this House, who has not just traveled around his district talking to people harmed by this law but has traveled around the United States of America.

Mr. SCALISE. Mr. Speaker, I want to thank the gentleman from Alabama for yielding and for his leadership in bringing this bill to the floor to repeal the President's health care law.

It was back in 2010 when then-Speaker PELOSI infamously said:

We have to pass the bill so you can find out what's in it.

Well, Mr. Speaker, we know what is in the bill. American people across the country have seen the devastating impacts of the President's health care law. Millions of people have lost the good health care that they had that they liked. We all heard the promise: If you like what you have, you can keep it. The promise was broken to millions of people.

And not only did they lose good health care, but many, many millions of people have seen dramatic increases. They are paying double-digit increases for the health care that they do have. And what is worse, Mr. Speaker, is we have seen that vital doctor-patient relationship violated now by unelected bureaucrats in Washington who have come in between the doctor and the patients to make decisions on people's health care. That is not the way to do reform. That was the old way, the Washington-knows-best way.

There is a better way, and this bill starts that process by first repealing the law in its entirety and then getting the committees of jurisdiction involved, putting an alternative in place with a shot clock of 180 days where we can come up with a real bipartisan alternative. Let's repeal this law, and let's restore the doctor-patient relationship.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 3 minutes to the gentleman from Colorado (Mr. POLIS).

Mr. POLIS. Mr. Speaker, it is week five of the 114th Congress, and I really feel like that movie "Groundhog Day," where the same day just keeps repeating itself over and over and over again. This is the 56th time that we have been through this particular exercise, repealing the Affordable Care Act here in the House. We get it. Republicans want to repeal the Affordable Care Act. Go ahead and try to get President Obama's signature on that piece of legislation. It ain't going to happen. But here we go again and again and again.

We are considering recycled political gimmicks that everyone here knows deprive the American people of affordable health care and won't create a single job and would increase our deficit by over \$200 billion.

By the way, there is an accounting trick in the Ryan budget. What the Republican budget does is it keeps all of the ObamaCare taxes and gets rid of all of the benefits. That is the worst of both worlds. The Republicans want you to pay for ObamaCare and not get it. Does that make any sense, Mr. Speaker? We are starting to see the dangers of this strange "Groundhog Day" brand of so-called policymaking.

This is what happens when we abandon regular order. We don't have mark-ups in committee, we don't have hearings—to jam through partisan legislation under a closed process without an opportunity to even suggest what might replace the Affordable Care Act or what kind of health care policy we want to help make health care more affordable in our country.

This bill would leave 27 million Americans out in the cold without health care. What about even more Americans who wouldn't have coverage for preexisting conditions or who wouldn't have access to affordable prescription drugs?

This bill would mean real harm and real hardship for people in my district—couples like Mike and Lynn in Loveland, whose health care cost more than their mortgage before the Affordable Care Act. It cost \$850 a month. But thanks to the Affordable Care Act, they were able to find a plan that costs \$200 a month. Or people like Robin in Eagle County in my district, who could barely afford \$600 a month in health care costs but now, thanks to the Affordable Care Act and the tax credits, pays just \$132 a month.

Another constituent of mine didn't go to the doctor for years because he was uninsured. But because of the Affordable Care Act, he was eligible for the Medicaid expansion. For the first time he received a colonoscopy and doctors discovered and removed a precancerous polyp. Without ACA, that might have become a cancer, costing him his life, not to mention the tens or hundreds of thousands of dollars of taxpayer money for that procedure that were saved thanks to the Affordable Care Act.

We can do better. We can escape this endless loop, this "Groundhog Day," and start talking about real job-creating legislation, improvements to health care that Democrats and Republicans can agree on because they make sense for our country. There are real lives at stake. I urge my colleagues to vote "no."

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Georgia (Mr. CARTER), a new member of the Education and the Workforce Committee and a new Member of this body.

Mr. CARTER of Georgia. Mr. Speaker, I stand before you in support of H.R. 596 for three reasons. First, of all, I am a member of the middle class. Secondly, I am an employer. I was an employer of a small business and had employees. Thirdly, and perhaps most importantly, I am a health care professional, the only pharmacist in Congress. And I can tell you that the Affordable Care Act, ObamaCare, is destroying health care that I have worked in for over 30 years, and I refuse to step aside and let that happen.

Mr. Speaker, the ACA has increased costs, increased deductibles, and decreased coverage for the middle class. That is not what it was supposed to do.

For employers, it has increased costs and decreased the coverage for their patients and, most importantly, for health care, Mr. Speaker.

What ObamaCare has done is to drive the free market out of health care. You don't see any more independent pharmacies. You don't see any more independent doctors. They are all members

of health care systems or hospitals employed by them. There are only three or four major pharmacies now, and we are heading more toward that.

□ 1600

You don't see patients having a say in their drug coverage anymore. Drug therapy is decided not by a pharmacist, not by a doctor, not by the patient, but by insurance companies and government. ObamaCare has to end.

Mr. SCOTT of Virginia. Mr. Speaker, I enter into the RECORD the following letters in opposition: one from the National Committee to Preserve Social Security & Medicare, another from Easter Seals, another from the AFL-CIO, and another from the SEIU.

FEBRUARY 2, 2015.

House of Representatives,  
Washington, DC.

DEAR REPRESENTATIVE: On behalf of the millions of members and supporters of the National Committee to Preserve Social Security and Medicare, I urge you to oppose H.R. 596, a bill to repeal the Patient Protection and Affordable Care Act.

Repealing the Affordable Care Act (ACA) would be detrimental to Americans of all ages: It would undercut the ability of marketplace insurance plans to offer affordable health coverage to individuals, including those with pre-existing conditions. Repeal would mean that young adults could no longer count on remaining on their parents' insurance plans until age 26. In addition, the number of uninsured "young seniors," aged 50-64, would increase, leaving them in poorer health by the time they are eligible for Medicare—thereby increasing Medicare's costs.

Repealing the ACA would also eliminate many of that law's provisions that benefit Medicare beneficiaries today, including help with prescription drug costs and preventive screenings and wellness visits with no out-of-pocket costs. In addition, the payment and delivery system reforms that are being implemented due to the ACA are slowing the rate of increase in health spending while improving the care that is being provided, especially care to people with multiple chronic conditions. Slowing the rate of increase in health spending has also lowered costs for beneficiaries—the Part B premium has stayed level for three years in a row—and is extending the solvency of the Part A trust fund.

We oppose H. R. 596 because it interferes with the ability of marketplace insurance plans to offer affordable health coverage, and hurts millions of seniors who benefit from the Medicare improvements contained in the ACA. The National Committee strongly urges you to vote against this anti-senior legislation.

Sincerely,

MAX RICHTMAN,  
President and CEO.

FEBRUARY 3, 2015.

DEAR REPRESENTATIVE: Easter Seals is writing to request that you vote no on HR 596, legislation to repeal the Patient Protection and Affordable Care Act (ACA). This law provides critical access to appropriate and high quality health care services that is essential for people with disabilities to live, learn and work and play in their communities. Easter Seals is the leading non-profit provider of services for individuals with autism, developmental disabilities, physical and mental disabilities, and other special needs.

One of the most important provisions in the ACA is the policy under which insurance companies can no longer refuse to cover children with disabilities and other pre-existing conditions. This provision came into affect on September 23, 2010. For children served by Easter Seals and their families, this provision can transform a family. Prior to the law, families would lose coverage of their child with cerebral palsy, epilepsy or another condition. The only way that the family could get the services their child needed was to pay out of pocket. For many families, they had no choice but to take out a second mortgage, declare bankruptcy, or have their child go without the services he or she needs to be healthy and strong.

The goal of the health care reform law is to assure that all people have access to quality, affordable health care and long term services and supports that meet their individual needs. It is through these types of changes to the health care system that we can hope to enable all Americans, including people with disabilities and chronic conditions, to be healthy, functional, live as independently as possible and participate in their communities.

Please vote NO on HR 596. Thank you for considering our views.

Sincerely,

KATHERINE BEH NEAS,  
Executive Vice President for Public Affairs.

FEBRUARY 2, 2015.

DEAR REPRESENTATIVE: On behalf of the AFL-CIO, I urge you to vote against H.R. 596, legislation that will repeal the Affordable Care Act (ACA). In pursuing yet another vote against the health reform law, the House Republican leadership persists in its campaign to undermine the coverage expansions of the ACA, erecting barriers that will keep millions of uninsured Americans from accessing coverage under the law.

Based on the latest Congressional Budget Office (CBO) estimate of the ACA coverage expansions, 19 million U.S. residents would lose coverage in 2015 if the ACA is repealed—people who would lack coverage today if not for the ACA. CBO also estimates that 36 million individuals remain uninsured today, even with the expansion of coverage through the marketplaces and Medicaid.

In large part, millions remain uninsured because a number of governors and state legislatures have refused to pursue an expansion of their Medicaid programs or have prohibited government agencies from providing ACA enrollment assistance to the residents of their states. Twenty-two states have refused to extend Medicaid coverage to lower-income residents, turning away coverage that is almost completely subsidized by the federal government. Other states refuse to provide education and assistance to people who need help negotiating the complex decisions involved in applying for coverage. The Kaiser Family Foundation found that the lack of information about enrollment choices is making it difficult for many individuals to access coverage that is available to them.

This partisan resistance to the ACA coverage expansions at the state level is bolstered by these votes to repeal the ACA in Washington. It is time to break the partisan deadlock on health care reform and to focus on needed changes that will strengthen, not weaken, family health security—reforms that both improve and build upon the ACA.

We can begin improving the ACA to expand access to affordable coverage by eliminating the 40 percent excise tax on health benefits, by basing eligibility for premium subsidies on the costs of family coverage, and by ensuring that new fees intended for commercial insurance issuers will not apply to nonprofit

coverage. We hope that bipartisan attention will be focused soon on productive ways of addressing needed modifications to the ACA.

Sincerely,

WILLIAM SAMUEL,  
Director, Government Affairs Department.

FEBRUARY 3, 2015.

DEAR REPRESENTATIVE: On behalf of the 2 million members of the Service Employees International Union (SEIU), I urge you to oppose H. R. 596, a bill to repeal the Affordable Care Act (ACA). H.R. 596 puts millions of working families' financial security and health at risk by eliminating essential consumer protections, access to affordable coverage, and higher quality care made possible by the ACA.

Already, about 100 million Americans are benefiting from the ACA. Prior to the ACA, millions of Americans did not have access to health insurance, or were only able to obtain insurance that was costly but did not provide the coverage they needed. However, the ACA changed that reality. Due to the ACA, no longer are insurance companies allowed to discriminate against women or those with pre-existing conditions by charging them more for coverage or refusing to provide them with coverage at all. As a result of the ACA's closure of the Medicare drug coverage gap, older Americans now have relief from excessive drug costs that forced many to go without medically necessary medications. Furthermore, the ACA promotes preventive care, which helps us all, regardless of race, gender, ethnicity, or income, avoid the development of more serious chronic conditions that prevent us from living long and healthy lives. These are just of the few ways that the ACA has bettered the day to day lives of Americans.

Perhaps most significantly, people are getting covered. In fact, 9.5 million consumers have signed up to receive coverage through ACA marketplaces, millions more signed up for Medicaid, and the number of uninsured in America has dropped by 10 million people. No longer do working families have to worry about being one accident or illness away from bankruptcy. We cannot take actions that force people to go without coverage they desperately need.

There is also an untold story of the ACA. The law aims to create a more efficient system by promoting quality over quantity of care and reducing waste, fraud, and abuse in our system. The Congressional Budget Office and the Social Security and Medicare Boards of Trustees have found that healthcare spending is slowing at record rates. The ACA includes programs, like those that provide incentives to hospitals to reduce readmissions and encourage care coordination across settings, which aspire to further build on this trend and, most importantly, improve patients' health and experience. A vote for this bill is a vote to reverse all of this progress.

As with every major law, there are ways to improve upon the solid base the ACA provides, however, full repeal is a step backwards for millions of working families. SEIU strongly urges you to oppose H. R. 596. Votes on this legislation may be added to our congressional scorecard, located at [www.seiu.org](http://www.seiu.org). If you have any questions, do not hesitate to contact Ilene Stein, Assistant Legislative Director, at 202-730-7216 or [ilene.stein@seiu.org](mailto:ilene.stein@seiu.org).

Sincerely,

MARY KAY HENRY,  
International President.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Michigan (Mr. BISHOP),

another new Member of this body and another new member of the Education and the Workforce Committee, who brings a unique experience to this body.

Mr. BISHOP of Michigan. Mr. Speaker, I thank the gentleman for yielding.

Mr. Speaker, for the past 20 years as a practicing lawyer and businessowner, I have seen firsthand how companies have tried to grow and create more jobs, but they simply can't, due to the strangling grip of ObamaCare's employer mandate.

Small businesses tell the story of how their current plan was canceled and how they were forced by ObamaCare into a health plan that covers less with higher copays and higher deductibles, along with astronomical, unsustainable increases in premiums.

Simply stated, ObamaCare is crushing small businesses across this great country. Despite the urgency of this crisis, the President has decided to dig himself in and promised to veto any commonsense reform, such as removing this employer mandate.

If the White House has decided not to collaborate with Congress to ease the burdens on families and businesses, then the only path we have is full repeal.

Along with that, Mr. Speaker, we need to move forward and develop commonsense health care reform that not only respects families and the doctor-patient relationship, but also considers any and all opportunities to lower skyrocketing health care costs.

I urge my colleagues to join me in voting "yes" on H.R. 596.

Mr. SCOTT of Virginia. Mr. Speaker, I enter into the RECORD letters in opposition from the following organizations: the American Academy of Family Physicians, the American Diabetes Association, and the American Public Health Association.

FEBRUARY 3, 2015.

*House of Representatives,  
Washington, DC.*

DEAR REPRESENTATIVE: The House of Representatives is scheduled to vote on HR 596, which would repeal the Patient Protection and Affordable Care Act (ACA). The AAFP urges Congress not to repeal this nearly 5-year-old health care reform law, but rather focus on how the measure can be revised to improve patient care and restrain health system costs.

The ACA addresses several important persistent problems with the nation's delivery of health care. First of all, it has demonstrably improved access to health care. As the most recent Gallup poll of the uninsured shows, the uninsured rate in the fourth quarter of 2014 fell to 12.9 percent, which is the lowest since Gallup began measuring it. By comparison, 17.1 percent were uninsured at the end of 2013. This substantial decline in the uninsured rate in one year has been broadly felt since it was evident in all the demographic categories.

Second, the ACA establishes critical insurance reforms to prevent abuses such as reducing or eliminating coverage due to pre-existing conditions, or setting prohibitively high prices on the individual market based on health status. Third, it encourages innovation in health care delivery through extensive research performed by the CMS Innova-

tion Center. As recently as last week, for example, CMS announced early results of the Comprehensive Primary Care Initiative which demonstrate significant cost reductions in the first year due to investments in primary care. Fourth, the ACA requires both Medicare and private health plans to cover preventive health services (without cost-sharing), which is a proven long-term strategy to improve health while reducing costs.

There are elements of the ACA that cause the AAFP concern, including the poorly constructed Independent Payment Advisory Board (IPAB). Congress should carefully review these elements with an eye to improving them for patients, for physicians and other providers, and for taxpayers, generally. The AAFP will continue to offer you our support for such efforts. However, in the meantime, it is important to avoid the disruptions and turmoil that repeal of the ACA would cause.

Sincerely,

REID B. BLACKWELDER, MD, FFAFP,  
*Board Chair.*

FEBRUARY 2, 2015.

Hon. JOHN BOEHNER,  
*Speaker of the House,*

*House of Representatives, Washington, DC.*

DEAR SPEAKER BOEHNER: On behalf of the nearly 30 million Americans with diabetes and the 86 million with prediabetes, the American Diabetes Association is writing to express our opposition to HR 596, legislation that would repeal the Patient Protection and Affordable Care Act (ACA).

For the millions of people with diabetes and those at risk of developing it, the ACA provides access to quality health care that is vital to the prevention and management of diabetes, and in maintaining overall health. The law protects people with diabetes who, prior to the ACA, were discriminated against because of their disease when they sought health insurance. It also expands access to quality health care and prevention programs needed to curb the current diabetes epidemic and prevent its devastating complications, including blindness, amputation, heart disease and kidney failure.

People with diabetes are benefiting from many provisions in the law, including the elimination of annual and lifetime limits on health insurance coverage, access to free preventive care, lower prescription drug costs for seniors, allowing young adults to stay on their parent's insurance plans, and the development of a successful program aimed at preventing type 2 diabetes.

The Association is committed to working with Members of Congress and government officials on the law's implementation to ensure people with diabetes, and all Americans, have access to the health insurance they need and cannot be discriminated against because of pre-existing conditions. We urge Members of the House to oppose repeal of the Affordable Care Act. Should you have any questions or need further information, please feel free to contact Amy Wotring, Associate Director, Federal Government Affairs at awotring@diabetes.org or 703-299-2087.

Sincerely,

SHEREEN ARENT,  
*Executive Vice President,  
Government Affairs & Advocacy.*

FEBRUARY 2, 2015.

*House of Representatives,  
Washington, DC.*

DEAR REPRESENTATIVE: On behalf of the American Public Health Association, which champions the health of all people and all communities by strengthening the profession of public health, sharing the latest research and information, promoting best practices and advocating for public health issues and

policies grounded in science, I write in strong opposition to H.R. 596, legislation to repeal the Affordable Care Act.

The ACA is critical to addressing the biggest challenges facing our health system including the rising costs associated with our health care system, uneven quality of care, deaths due to medical errors, discriminatory practices by health insurance providers and the shrinking ranks of the nation's primary care providers. The ACA is helping to shift our health system from one that focuses on treating the sick to one that focuses on keeping people healthy.

Under the law, millions of previously uninsured Americans now have affordable and comprehensive health insurance coverage through the health insurance marketplaces as well as through the expansion of the Medicaid program, significantly reducing the uninsured rate. This year, 9.5 million individuals have already enrolled in coverage through the health insurance marketplaces. Since its enactment, the law has provided 71 million Americans with access to preventive health care services such as vaccines, disease screenings, well-child visits and tobacco cessation counseling without co-pays or deductibles. Thirty seven million seniors have also accessed preventive services without cost through the Medicare program. More than 3 million young adults up to age 26 are able to stay on their parents' health insurance plans and nearly 129 million individuals with pre-existing conditions are protected from insurance coverage denials. In addition, the ACA provides critical mandatory funding through the Prevention and Public Health Fund for community-based prevention and wellness activities including efforts to control the obesity epidemic, reduce tobacco use and modernize vaccination systems.

Protecting the ACA and working to effectively implement this critical law to protect and improve the health of the American people will remain a top priority for APHA, and we will consider including this vote in our 2015 annual congressional vote record.

We ask you to oppose this and future efforts to repeal the ACA and we look forward to working with you to create the healthiest nation in one generation.

Sincerely,

GEORGES C. BENJAMIN, MD,  
*Executive Director.*

Mr. SCOTT of Virginia. I reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Georgia (Mr. ALLEN), another new member of the Education and the Workforce Committee and new Member of this body.

Mr. ALLEN. Mr. Speaker, I thank the gentleman from Alabama for yielding.

Mr. Speaker, individuals, families, and businesses alike—in Georgia and across the Nation—agree that ObamaCare is wrong for Americans. Across my district, hardworking Georgians trying to make ends meet have told me their health care premiums have skyrocketed under this law.

Many have learned the plan they liked and were promised they could keep have been canceled, and they have been denied care and access to their doctors.

In addition to hurting America's families, ObamaCare's costly mandates burden small businesses, the bedrock of job creation and entrepreneurship, and



have real consequences for their employees facing lower hours and wages.

The nonpartisan Congressional Budget Office estimates that the law will lower the number of full-time equivalent workers by 2.5 million. The President's own Centers for Medicare and Medicaid Services also found that an estimated two-thirds of small businesses will see their health care premiums go up under ObamaCare.

I urge my colleagues to support H.R. 596.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 3 minutes to the gentleman from Connecticut (Mr. COURTNEY).

Mr. COURTNEY. Mr. Speaker, almost exactly a year ago, the Republican majority held a retreat where other Members met and they set their agenda for 2014. After that retreat, the leadership issued a statement promising, with a solemn promise, that the House Republicans will rally around and pass an alternative to ObamaCare this year.

That is about 4 years after the law passed, but at least you can give them some credit that they were going to move forward in 2014 with an alternative to the Affordable Care Act.

That was last winter, and winter turned to spring, spring turned to summer, summer turned to fall, fall turned to winter, and we never had a vote in the House on the alternative, the promised alternative to ObamaCare.

Maybe the committees took action, the committees that this proposed bill is lateraling this issue off to. Did we have a committee vote on Education and the Workforce, Ways and Means, Energy and Commerce? No. Did we have hearings on an alternative that was promised by the majority caucus a year ago on an alternative to the Affordable Care Act? No, no hearings, no markup, no vote, no bill.

Here we are today with the majority once again throwing out a promise: Trust us. In 180 days, we will have an alternative to the Affordable Care Act.

Well, Mr. Speaker, unfortunately, in the last year, millions of Americans have moved on. Parents are insuring their kids through the Affordable Care Act up to age 26.

There are Members in the majority who take advantage of that very provision to provide coverage for their children under the Affordable Care Act that they seek to repeal here today.

Millions of seniors see their prescription drug costs cut because of the Affordable Care Act because of the leftover of the Republican prescription drug bill which led this outrageous doughnut hole that threw 100 percent of the cost of medications to seniors who were paying monthly premiums.

Yes, we saw the startup of exchanges, both at the State level—like my State in the State of Connecticut—and the Federal exchange, which have enrolled millions of Americans in affordable plans.

This year, the Affordable Care Act in Connecticut, we had submissions by

the insurance companies to participate in 2015. Did we see reduced competition? Did we see less of a free marketplace? No, we saw more competition. We have more insurers who are offering the product through the exchange in 2015 than in 2014.

Did we see rates go up? Mr. Speaker, I am going to enter into the RECORD a record from the Connecticut State Insurance Department which shows that rates went down—down—for individual plans and for small group market plans.

#### STATE OF CONNECTICUT INSURANCE DEPARTMENT

##### 2014 CONNECTICUT INSURANCE RATE FILINGS FOR ON/OFF EXCHANGE 2015 POLICIES

##### Individual Market Requested and Approved Changes

###### Aetna Life Insurance Co.:

—Requested Change: 9.4%  
—Approved Change: 4.60%  
—Effective 1/1/2015

###### Celtic Insurance Company:

—Requested Change: 0.00%  
—Approved Change: -6.50%  
—Effective 1/1/2015

###### ConnectiCare Benefits, Inc.:

—Requested Change: 12.8%  
—Approved Change: 3.10%  
—Effective 1/1/2015

###### ConnectiCare Inc.:

—Requested Change: -21.50%  
—Approved Change: -21.50%  
—Effective 1/1/2015

###### ConnectiCare Insurance Co.:

—Requested Change: 1.40%  
—Approved Change: 1.30%  
—Effective 1/1/2015

###### UnitedHealthcare Ins. Co.:

—Requested Change: 0.00%  
—Approved Change: -9.30%  
—Effective 1/1/2015

###### Golden Rule Insurance Co.:

—Requested Change: 0.00%  
—Approved Change: -6.91%  
—Effective 1/1/2015

###### HealthyCT, Inc.:

—Requested Change: -8.60%  
—Approved Change: -8.50%  
—Effective 1/1/2015

###### Time Insurance Company:

—Requested Change: 25.00%  
—Approved Change: 6.00%  
—Effective 1/1/2015

###### Cigna Health and Life Insurance Company:

—Requested Change: 15.23%  
—Approved Change: 8.82%  
—Effective 1/1/2015

###### Anthem Health Plans:

—Requested Change: 12.5%  
—Approved Change: -0.10%  
—Effective 1/1/2015

###### UnitedHealthcare Life Insurance Company:

—Requested Change: 0.00%  
—Approved Change: -9.20%  
—Effective 1/1/2015

Average Requested Change: 3.85%

Average Approved Change: -3.18%

Estimated savings for consumers in Individual Market: \$79,099,427

##### Small Group Market Requested and Approved Changes

###### Aetna Life Insurance Co.:

—Requested Change: 5.90%  
—Approved Change: 5.90%  
—Effective 1/1/2015

###### Anthem Health Plans:

—Requested Change: 6.00%  
—Approved Change: 4.40%  
—Effective 1/1/2015

###### HealthyCT, Inc\*:

—Requested Change: -13.40%

—Approved Change: -13.40%  
—Effective 1/1/2015

###### UnitedHealthcare Ins. Co.\*:

—Requested Change: 2.50%  
—Approved Change: 2.50%  
—Effective 1/1/2015

###### ConnectiCare Inc.:

—Requested Change: -1.40%  
—Approved Change: -5.00%  
—Effective 1/1/2015

###### ConnectiCare Insurance Co.\*:

—Requested Change: 7.00%  
—Approved Change: 7.00%  
—Effective 1/1/2015

###### Harvard Pilgrim Healthcare of CT:

—Requested Change: 2.80%  
—Approved Change: -12.00%  
—Effective 1/1/2015

###### HPHC Insurance Co.\*:

—Requested Change: -3.40%  
—Approved Change: -9.40%  
—Effective 1/1/2015

###### Oxford Health Insurance\*:

—Requested Change: 10.20%  
—Approved Change: 10.20%  
—Effective 1/1/2015

###### Oxford Health Plans (CT):

—Requested Change: 10.20%  
—Approved Change: 9.00%  
—Effective 1/1/2015

Average Requested Change: 2.64%

Average Approved Change: 0.08%

\*CID has review authority but not approval authority over these filings

Estimated savings for consumers in Small Group Market: \$9,448,203

Estimated savings for combined Individual & Small Group Markets: \$88,547,630

Mr. COURTNEY. The fact of the matter is that this marketplace, which now has more carriers, is now providing lower rates, saving close to \$90 million from last year's rates than the year before.

The SPEAKER pro tempore (Mr. HULTGREN). The time of the gentleman has expired.

Mr. SCOTT of Virginia. I yield the gentleman an additional 30 seconds.

Mr. COURTNEY. Mr. Speaker, what we are being asked to do here today is to stop that progress, to take away that coverage to young adults that today get it through their parents' plans, to take away the prescription drug benefit, to take away from seniors the relief that they are getting for life-saving medications, and to tell those individual and small group plans that are purchasing it—this year, again, we have 70,000 reenrollments of the 75,000 enrolled last year, and we have 30,000 new that have enrolled this year in that plan.

We have cut the uninsured rate in a State like Connecticut that has embraced the law down to 4 percent of its population.

You are telling folks like me to blow it up, get rid of it, and you have no plan, even though your caucus made a promise a year ago to the American people that they would provide a plan, and they never came through with it.

Reject this bill.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Florida (Mr. DESANTIS), my distinguished colleague.

Mr. DESANTIS. Mr. Speaker, my colleagues have demonstrated ably the substantive problems with this law:

higher costs, canceled coverage, lost doctors.

I would just like to say that ObamaCare has done harm to republican government properly understood. When you go around the country telling people over and over again that they can keep their plans, that they can keep their doctors, and that they will see thousands of dollars in savings on health insurance premiums, all the while you know—or should have known—that those promises were false, I think that damages our political system because, ultimately, representative government requires honest dialogue between elected officials and the citizenry.

It is almost as if this is the Jonathan Gruber law where we want to tell people lies in order to get bills that we would not have passed otherwise. I think that is unacceptable.

These promises made to the American people were false, the American people were deceived, and I think our representative government and political system have been damaged as a result.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 1½ minutes to the gentlewoman from North Carolina (Ms. ADAMS).

Ms. ADAMS. Mr. Speaker, I thank the gentleman for yielding, and I rise today in support of the Affordable Care Act.

One year after implementing the health care exchanges, the number of uninsured in this country has decreased dramatically. Implementing the health care exchanges has provided health insurance access to 208,000 individuals in my district, with Charlotte accounting for one of North Carolina's highest number of subsidized health insurance enrollments.

Young adults can now stay on their parents' plans until age 26, resulting in nearly 10,000 young adults retaining health insurance in my district. Seniors in my district have saved \$11.1 million through Medicare part D prescription drug discounts.

The Affordable Care Act has also created 9.6 million private sector jobs. My district's unemployment rate is 13.9 percent, so for me, this is not just about health, but jobs and our economy.

These tangible benefits cannot be ignored. I urge my Republican colleagues to end talks of repeal and instead work with Democrats to strengthen the law.

The Affordable Care Act would have meant a lot to my sister who I often had to take to the emergency room for primary care for sickle cell. She died at age 26, but I know she would have been grateful for the coverage provided by the Affordable Care Act.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Texas (Mr. BABIN), a new Member of the House, who is himself a dentist.

Mr. BABIN. Mr. Speaker, I thank the chairman.

Mr. Speaker, I rise in strong support of H.R. 596, legislation that I have cosponsored to fully repeal ObamaCare.

My constituents sent me to Washington to repeal this disastrous law, and that is what we are doing today, the number one issue in my district.

As a health care provider myself for 38 years, I have seen firsthand the devastating effects of ObamaCare and how it undermines the doctor-patient relationship.

It is costing us jobs and work hours and has led to millions of Americans losing their health plans that they had and wanted to keep and were promised such. Restoring the patient's right to choose a plan that they want and can afford is just plain common sense.

Our bill does this by repealing ObamaCare and replacing it with free market solutions. We put America on a path toward patient-focused care, rather than government-directed care. The traditional doctor-patient relationship would be restored.

Let's show the American people that we are listening and rid the Nation of this terrible law and replace it with policies that work.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Utah (Mr. STEWART), a colleague of ours and a distinguished veteran.

Mr. STEWART. Mr. Speaker, I would like to thank my friend, the gentleman from Alabama, for giving me time to express the importance of repealing what has been one of the most destructive laws ever written.

The intent of ObamaCare was to make health care more accessible and more affordable and, in fact, has done exactly the opposite.

I have heard from hundreds of my constituents who tell me how it has impacted their lives. A friend of mine from Bountiful, their premiums have doubled—have doubled. A small business owner in the southern part of my district, who found they could not get insurance at all, their plan was entirely taken away.

This law was built on a foundation of deceptions. We were told: "If you wanted to keep your doctor, you could keep them." We were told: "If you wanted to keep your plan, you could keep it." We were told it would reduce costs by an average of \$2,500 per family.

We now know that all of that is not true and that they knew at the time they passed this law that it was not true.

All of us want to take care of those who have preexisting conditions; all of us want to provide insurance to the uninsured. We can do better.

Mr. SCOTT of Virginia. Mr. Speaker, I continue to reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Washington (Mr. NEWHOUSE), another freshman in this House.

□ 1615

Mr. NEWHOUSE. Thank you to the gentleman from Alabama.

Mr. Speaker, since its hasty passage in 2010, ObamaCare has been detrimental to American families, businesses, and taxpayers. Americans were promised that they could keep their health care plans and see their premiums decrease. Instead, they have been irreparably harmed by the elimination of their existing health care plans and pushed into a one-size-fits-all health care system—a system that fails to consider individual needs and that eliminates choice of physicians while families are faced with soaring premiums.

The cost of implementing ObamaCare has crippled businesses, hurting the drivers of our economy. Small and large businesses have been forced to pass these increased costs on to their employees, resulting in a decreased workforce, lower wages, and delayed hiring. ObamaCare has hurt economic growth at a time when we can least afford it, damaging our fragile economic recovery.

Put simply, a government-centered approach to health care is not the answer. I urge my colleagues to join me in supporting this legislation.

Mr. SCOTT of Virginia. Mr. Speaker, I reserve the balance of my time.

Mr. BYRNE. Mr. Speaker, I yield 1 minute to the gentleman from North Carolina (Mr. WALKER), another freshman Member and a gentleman who brings great experience to his position in this House.

Mr. WALKER. Thank you, Mr. Chairman.

Mr. Speaker, "middle class economics" is the President's new catchphrase and method to pay lip service to helping American families—more smoke and mirrors.

In November, voters spoke loudly and clearly in sending 58 Members to Washington. I made a promise over these past 2 years that I would come to Washington and stand up. Today, for the first time, I am proud to vote for a full repeal of this law.

The ACA has caused insurance premiums to skyrocket for working families in North Carolina. It continues to weigh on our economy and on our job creators. This law is seriously flawed in the fact that the President's administration has overreached dozens of times in trying to change and fix the law themselves. Yes, the damaging effects of ObamaCare are so ingrained in the fabric of this law that fixing it is not an option. That is why I urge my colleagues to vote for H.R. 596 for a full repeal.

Mr. SCOTT of Virginia. Mr. Speaker, I believe the gentleman from Alabama is prepared to close.

Mr. BYRNE. I am, and I reserve the balance of my time for closing.

Mr. SCOTT of Virginia. Mr. Speaker, I yield the balance of my time to the gentleman from Oregon (Mr. BLUMENAUER).

The SPEAKER pro tempore. The gentleman is recognized for 1¼ minutes.

Mr. BLUMENAUER. Thank you, Mr. SCOTT.

Mr. Speaker, this is the 56th time we have gathered on the floor, talking past each other. The legislation that is offered by our Republican friends—a repeal—does not have any alternative. Frankly, everybody knows that it is not going to pass. If it were to be enacted into law, the President would veto it.

The facts don't justify the rhetoric. We have 10 million previously uninsured Americans. We have the lowest health care spending growth rate in 50 years. Health care premium inflation is growing at historic lows, and Medicare premiums are lower than they were before the ACA was passed, and it held steady for 3 years.

What should we be doing? Instead of trying to make the ACA worse and rail against it and get nowhere, I would suggest that we deal with things that we can agree upon.

I have been working with my colleague Mr. ROE on bipartisan legislation to deal with providers helping with end-of-life care for patients; with Representative ROSKAM, a Medicare Common Access Card, bipartisan legislation to establish a smart card pilot project to eliminate Medicare fraud; with Representative BLACK, a value-based design for better care which would establish a pilot project to test reducing or eliminating cost-sharing for seniors with high-value medications. These are things that we could do this month that would make a difference.

I hope that we stop this charade and get down to cases. The American public deserves our best efforts not to debate but to make health care better and to build on the foundation of the Affordable Care Act.

Mr. SCOTT of Virginia. I yield back the balance of my time.

Mr. BYRNE. Mr. Speaker, I yield myself such time as I may consume.

In closing, I have been listening carefully to the debate today. We have heard a lot from both sides, but at the end of the day, this is not about anybody in this House; this is about the American people. This is about something that is so very fundamentally important to them—their health care.

We took away the health care system that worked for 80 percent of the people of this country to fix a problem that we today know we fix for only 1 percent of the American people. Only 3 million new Americans have gotten on this new health care plan who didn't have health insurance before. That is 1 percent of the American people. We threw out the health care plan that worked for 80 percent of Americans to fix a problem for 1 percent of Americans.

Look what it has done.

It has wrecked lives. I have here from my office a sampling of emails and letters, which don't include the phone calls from people who came up to me in the over 30 town hall meetings I did

last year—women with tears in their eyes because they couldn't pay their health insurance, because they couldn't pay the deductibles when they went to the doctor or the hospital; a man who forwent going to get a particular type of surgery he needed because he couldn't pay the deductible. That is what this law has done to the people of America. It has victimized the people of America.

There is no way to fix this law. It is fundamentally flawed. We could go in and fix a problem piecemeal here and find a piecemeal resolution there. We would end up with another Frankenstein. The American people don't want Frankenstein. They don't want Groundhog Day either. They don't want the President to continue to throw stuff at them over and over again that doesn't work. They deserve a health care system that they control with their doctors, picking the health insurance programs that they want, that are not mandated by the Federal Government and that fit into their budgets. It empowers them instead of having their power taken away by some faceless bureaucracy in Washington.

Let's repeal this terrible ObamaCare law. Let's put in place a process that will give us a solution, one that works for people and what they really need. Let's get on with the business that we are here to do in order to make lives better for the American people.

I thank the majority leader, and I thank the Speaker, and I thank the whip for bringing this bill to the floor. I thank them for allowing my bill to be the one to be the package that we use today, and I ask all of my colleagues to vote "yes" on this important bill.

Mr. Speaker, I yield back the balance of my time.

Mr. SCHOCK. Mr. Speaker, I rise in support of H.R. 596 so the flawed Obamacare program can be reformed in order to focus on patient-centered care.

NANCY PELOSI infamously said "We have to pass the [health care] bill so that you can find out what's in it." Nearly five years later, the verdict is in: Obamacare continues to be a flawed program that created over \$1.8 trillion in new spending. It imposed over \$1 trillion in new taxes, including on those families who make less than \$250,000 a year—violating another promise made by President Obama. In fact, Obamacare's tax increases will be borne primarily by middle class Americans during a time of sluggish economic activity.

Instead of allowing individuals and families to take control of their own healthcare decisions, the health law contained 18 separate tax increases, fees and penalties that imposed mandate after mandate and resulted in over 20,000 pages of new rules and regulations. I believe a far simpler way to fix our broken healthcare system is to give individuals and families control over their own healthcare choices, such as through health savings accounts or incentives to live healthy lifestyles. Investment in prevention and wellness will not only lead to longer lifestyles for Americans but also reduce the overall cost of healthcare.

In my home state of Illinois, we have already seen the effects of Obamacare in effect. According to the Illinois Policy Institute, since 2011, Illinois has lost the equivalent of 66,000 across multiple sectors due to reduced hours or less workers in the workplace due to Obamacare's employer mandate. Illinois families in 101 out of the state's 102 counties are facing, on average, higher premium costs—in some cases those premiums are nearly 120% higher than they were before Obamacare according to the Manhattan Institute.

Finally, the President's health care law creates a limited religious conscience exemption that limits the exemption to a few select faiths. Legislation such as my EACH Act bill modestly expands the exemption so that more individuals who choose not to seek healthcare will not be fined for violating their religious beliefs.

I am proud to support this important legislation and I look forward to working with my colleagues on the Ways and Means Committee on solutions to better reform our healthcare system that protect the doctor-patient relationship while also incentivizing more people to take control of their own healthcare.

Ms. ROYBAL-ALLARD. Mr. Speaker, I rise in opposition to this 56th Republican attempt to repeal the Affordable Care Act.

We have been down this road before, with the same misleading rhetoric that does not reflect the true benefits of the health reform law.

This legislation is being brought to the Floor in order to give Republican Freshmen a voting opportunity to repeal the ACA, despite the fact that polls have repeatedly shown high satisfaction rates with the newly mandated coverage opportunities under Obamacare, even among Republicans.

My colleagues speaking against the ACA today are not listening to these polls, or to thousands of newly insured individuals in my 40th Congressional District who are thrilled with their new access to health care.

In my district and hundreds of other poor and minority communities across the country, the benefits of expanded coverage and provisions to address health disparities are already changing lives.

ACA opponents are not listening to women from all economic backgrounds who are no longer paying higher premiums because they are female, and who now have prenatal care as a covered benefit.

They are not listening to millions of seniors who love their free preventive services and lower prescription drug costs, or the disabled community that no longer has to live in fear of being denied coverage for pre-existing conditions or because they've reached lifetime limits.

Mr. Speaker, the ACA is working for my constituents, for women and minority communities, and for seniors and people with disabilities.

It is time for my Republican colleagues to listen to these Americans who DO NOT want to lose these health benefits.

This bill is the same misguided legislation Republicans forced through the House in

2011, 2012, and 2013. And like those bills, it has absolutely no chance of passing the Senate or being signed into law by the President.

Let's stop wasting Congressional time and taxpayer's money and find solutions to the other complex issues facing our nation such as creating jobs and strengthening our economy.

I urge my colleagues to vote no on H.R. 596.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 70, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

#### MOTION TO RECOMMIT

Mr. DESAULNIER. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. Is the gentleman opposed to the bill?

Mr. DESAULNIER. I am opposed in its current form, Mr. Speaker.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Mr. DeSaulnier moves to recommit the bill H.R. 596 to the Committee on Ways and Means with instructions to report the same back to the House forthwith, with the following amendment:

Add at the end of the bill the following:

#### SEC. 4. PROTECTING WOMEN, SENIORS, AND MIDDLE CLASS FAMILIES FROM THE HARMFUL EFFECTS OF HEALTH REPEAL.

The provisions of this Act shall not take effect unless and until such date that it is certified that such provisions will not result in—

(1) discrimination by health insurance issuers and group health plans on the basis of pre-existing conditions or gender, including in the form of higher premiums for women or loss of benefits such as mammograms, cervical cancer screenings, prenatal care, and commonly prescribed contraception;

(2) higher premiums or out-of-pocket costs for seniors for prescription drugs under prescription drug plans under the Medicare program under part D of title XVIII of the Social Security Act (42 U.S.C. 1395w-101 et seq.); or

(3) a tax increase on middle class families through the loss of subsidies to purchase health insurance coverage.

Mrs. LOVE (during the reading). Mr. Speaker, I reserve a point of order against the motion to recommit.

The SPEAKER pro tempore. A point of order is reserved.

The Clerk will read.

The Clerk continued to read.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from California is recognized for 5 minutes in support of his motion.

Mr. DESAULNIER. Mr. Speaker, I have listened intently to the comments of my friends on the other side of the aisle, and I must say that it has not been my experience where I come from, but maybe it is a little different with my being from California.

This is the final amendment to the bill, which will not kill the bill or send

it back to committee. If adopted, the bill, as amended, will immediately proceed to final passage.

Mr. Speaker, H.R. 596 would eliminate critical benefits and health care coverage from hardworking American families. In addition to taking away Americans' health care security, this bill would increase the deficit, make health care more expensive, and degrade the quality of care that patients are now receiving. If adopted, my motion to recommit would ensure that some of the most important protections of the Affordable Care Act would remain in effect.

Yesterday, as others have mentioned, was Groundhog Day, but, today, we are Bill Murray, living the same votes over and over again—in fact, as has been mentioned, 56 times over and over again.

This motion would protect existing law by continuing to, one, prevent insurance companies from discriminating based on preexisting conditions and gender or cutting health benefits for women; two, prevent increases in Medicare D prescription drug costs for seniors; and three, prevent a tax increase for middle class American families by the taking away of subsidies to purchase health insurance.

Mr. Speaker, I am a former Republican and a small business owner who supports the Affordable Care Act and who has seen the benefits for small business. I have also seen the benefits for the economy and for the 7 million Californians who do not have health insurance. Many individuals who wanted health insurance were unable to obtain it, either because it was too expensive or because they had preexisting conditions, including nearly 126,000 people in my home county in the Bay Area.

One of these individuals in my district is a young woman named Emily. Emily was born with a congenital heart defect, and as a result, she will need regular monitoring and treatment by a cardiologist. Were it not for the Affordable Care Act, Emily would have been left without critical health care and the necessary treatment for the remainder of her young life.

Her situation is not unique. Approximately 130 million other Americans no longer have to worry about being denied health care coverage because of their health status. Additionally, Mr. Speaker, under the Affordable Care Act, almost 8 million seniors have saved nearly \$10 billion on prescription drugs, and under the Affordable Care Act, many people paid less for their insurance in 2014 than in 2013.

Before the law was enacted, health care premiums were increasing exponentially, much faster than college tuition, workers' wages, and inflation. Once the law took effect, premium increases for plans slowed down substantially. Simply, this law is saving Americans money. This year in California, with 2 weeks left to go in open enrollment, more than 273,000 Californians have joined the nearly 1 million cov-

ered California customers who were enrolled in 2014. Nearly nine of 10 enrollees received some kind of financial help in 2014, ensuring that Californians can afford the kind of coverage that they need and want.

Repealing the law without including these three protections will cost more than we can afford—\$100 billion over the next 10 years, until 2022, and more than \$1 trillion in the following decade. It would also discriminate against women in the form of higher premiums, and it would make it impossible for many women to get the care they need.

Mr. Speaker, every American family deserves a plan that covers essential health benefits, like hospital care, emergency care, care for pregnant women, and a plan that won't bankrupt them or this country just because an illness or an accident occurs. Every American family deserves to know that they won't be kicked off their insurance for a preexisting condition or be subjected to lifetime caps that take away their benefits when they need them the most.

Health care, Mr. Speaker, is not a Democrat or a Republican issue; it is an American issue and a human issue. We are here to ensure that every American continues to have access to quality, affordable health care. If we can produce a bill that fulfills the goals set out by the Affordable Care Act, it doesn't matter who wrote or signed the bill. But repealing the Affordable Care Act without including these important protections for hardworking, middle class American families is irresponsible and reckless.

I yield back the balance of my time.

Mrs. LOVE. Mr. Speaker, I withdraw my reservation of a point of order.

The SPEAKER pro tempore. The reservation of the point of order is withdrawn.

Mrs. LOVE. Mr. Speaker, I claim the time in opposition to the gentleman's motion.

The SPEAKER pro tempore. The gentleman from Utah is recognized for 5 minutes.

□ 1630

Mrs. LOVE. Mr. Speaker, I would like to ask a few questions of my colleagues as it relates to health care.

Has Congress made health care more accessible and affordable? Has the quality of care improved? No.

Do hardworking families and our children deserve better? Absolutely.

Now is the time to repeal and replace this disaster of a law. This law has hurt more poor and more middle-income families.

I received a letter from a constituent. Mr. Speaker, the letter states:

I wonder if you would like a real-life example of what ObamaCare is doing to families. My daughter and her husband are expecting their second child. They were planning on moving from their small apartment to a small home. Their insurance has doubled under ObamaCare, and they will pay \$500 a month. Their deductible will be \$10,000. They

will have to pay each doctor for a phone call plus \$50 copayment. No specialists are covered. They barely are getting by as it is. Because of their insurance costs, there is no chance of getting into a home or even a bigger apartment. How can insurance for everyone be of help if it causes such a financial burden on families? My daughter is so depressed. She isn't even excited about her upcoming child because she is so worried about their future. If we had the means to help, we would, but we don't. My heart breaks for her. How can Congress help?

Sincerely, Paula.

Now, people talk about tweaking ObamaCare. I ask: How do you tweak that to help that family?

The American people deserve better, Mr. Speaker. Imagine a health care system that is centered in service. Imagine a health care system that is measured by outcomes, not by Washington dictates.

I know that it is hard for some of my colleagues to contemplate, but imagine, if you will, for me, Mr. Speaker, a health care system where dollars and decisions are left with patients, their families, and their doctor. I see an American exceptionalism at work, where families and innovation and compassion drive the highest quality of care.

Members of Congress, Representatives of the people, do not settle. Don't settle for just tweaking a bad program that hurts more than it helps, that controls more than it empowers. There are too many Members of this body that are content with just getting this health care law to be good enough. I am here to tell you that, for the American people, good enough just isn't good enough.

I reject the downward spiral of mediocrity and government takeover of health care. I refuse to pursue the administration's path of fear, blame, and failure. I oppose this motion to recommit a bad health care law.

It is time for us, for this body, to advance the policies and the principles which have lifted more people out of poverty, fueled more freedom, and driven more dreams than any other set of principles in the history of the world. I ask this body to come with me, boldly step forward and unleash that American exceptionalism that produces the health care solutions that this family is worthy of and every hardworking American in this country is worthy of.

May God continue to bless this great, exceptional country.

Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to recommit.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Mr. DESAULNIER. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of rule XX, the Chair

will reduce to 5 minutes the minimum time for any electronic vote on the question of passage of the bill.

The vote was taken by electronic device, and there were—yeas 179, nays 241, not voting 13, as follows:

[Roll No. 57]

YEAS—179

Adams	Gabbard	O'Rourke
Aguilar	Gallego	Pallone
Ashford	Garamendi	Pascarella
Bass	Graham	Payne
Beatty	Grayson	Pelosi
Becerra	Green, Al	Perlmutter
Bera	Green, Gene	Peters
Beyer	Grijalva	Peterson
Bishop (GA)	Hahn	Pingree
Blumenauer	Hastings	Pocan
Bonamici	Heck (WA)	Polis
Boyle (PA)	Higgins	Price (NC)
Brady (PA)	Himes	Quigley
Brown (FL)	Hinojosa	Rangel
Brownley (CA)	Honda	Rice (NY)
Bustos	Hoyer	Richmond
Butterfield	Israel	Roybal-Allard
Capps	Jackson Lee	Ruiz
Capuano	Jeffries	Ruppersberger
Cárdenas	Johnson (GA)	Rush
Carney	Johnson, E. B.	Ryan (OH)
Carson (IN)	Kaptur	Sánchez, Linda
Cartwright	Keating	T.
Castor (FL)	Kelly (IL)	Sanchez, Loretta
Castro (TX)	Kennedy	Sarbanes
Cicilline	Kildee	Jordan
Clark (MA)	Kilmer	Schakowsky
Clarke (NY)	Kind	Schiff
Clay	Kirkpatrick	Schrader
Cleaver	Kuster	Scott (VA)
Clyburn	Langevin	Scott, David
Cohen	Larsen (WA)	Serrano
Connolly	Larson (CT)	Sewell (AL)
Conyers	Lawrence	Sherman
Cooper	Levin	Sinema
Costa	Lewis	Sires
Courtney	Lieu (CA)	Slaughter
Crowley	Loebbeck	Smith (WA)
Cuellar	Lowenthal	Speier
Cummings	Lujan Grisham	Swalwell (CA)
Davis (CA)	(NM)	Takai
Davis, Danny	Luján, Ben Ray	Takano
DeFazio	(NM)	Thompson (CA)
DeGette	Lynch	Thompson (MS)
Delaney	Maloney,	Titus
DeLauro	Carolyn	Tonko
DelBene	Maloney, Sean	Torres
DeSaulnier	Matsui	Tsongas
Deutch	McCollum	Van Hollen
Dingell	McDermott	Vargas
Doggett	McGovern	Veasey
Doyle (PA)	McNerney	Vela
Edwards	Meeks	Velázquez
Ellison	Meng	Visclosky
Engel	Moore	Walz
Eshoo	Moulton	Wasserman
Esty	Murphy (FL)	Schultz
Farr	Nadler	Waters, Maxine
Fattah	Napolitano	Watson Coleman
Foster	Neal	Wilson (FL)
Frankel (FL)	Nolan	Yarmuth
Fudge	Norcross	

NAYS—241

Abraham	Buck	Dent
Aderholt	Bucshon	DeSantis
Allen	Burgess	DesJarlais
Amash	Byrne	Diaz-Balart
Amodei	Calvert	Dold
Babin	Carter (GA)	Duffy
Barletta	Carter (TX)	Duncan (SC)
Barr	Chabot	Duncan (TN)
Barton	Chaffetz	Ellmers
Benishek	Clawson (FL)	Emmer
Bilirakis	Coffman	Farenthold
Bishop (MI)	Cole	Fincher
Bishop (UT)	Collins (GA)	Fitzpatrick
Black	Collins (NY)	Fleischmann
Blackburn	Comstock	Fleming
Blum	Conaway	Flores
Bost	Cook	Forbes
Boustany	Costello (PA)	Fortenberry
Brady (TX)	Cramer	Fox
Brat	Crawford	Franks (AZ)
Bridenstine	Crenshaw	Frelinghuysen
Brooks (AL)	Culberson	Garrett
Brooks (IN)	Curbelo (FL)	Gibbs
Buchanan	Davis, Rodney	Gibson

Gohmert	Luetkemeyer	Roskam
Goodlatte	Lummis	Ross
Gosar	MacArthur	Rothfus
Gowdy	Marchant	Rouzer
Granger	Marino	Royce
Graves (GA)	Massie	Russell
Graves (LA)	McCarthy	Ryan (WI)
Graves (MO)	McCaul	Salmon
Griffith	McClintock	Sanford
Grothman	McHenry	Scalise
Guinta	McKinley	Schock
Guthrie	McMorris	Schweikert
Hanna	Rodgers	Scott, Austin
Hardy	McSally	Sensenbrenner
Harper	Meadows	Sessions
Harris	Meehan	Shimkus
Hartzer	Messer	Shuster
Heck (NV)	Mica	Simpson
Hensarling	Miller (FL)	Smith (MO)
Herrera Beutler	Miller (MI)	Smith (NE)
Hice (GA)	Moolenaar	Smith (NJ)
Hill	Mooney (WV)	Smith (TX)
Holding	Mullin	Stefanik
Hudson	Mulvaney	Stewart
Huelskamp	Murphy (PA)	Stivers
Huizenga (MI)	Neugebauer	Thompson (PA)
Hultgren	Newhouse	Thornberry
Hunter	Noem	Tiberi
Hurd (TX)	Nugent	Tipton
Hurt (VA)	Nunes	Trott
Issa	Olson	Turner
Jenkins (KS)	Palazzo	Upton
Jenkins (WV)	Palmer	Valadao
Johnson (OH)	Paulsen	Wagner
Johnson, Sam	Pearce	Walberg
Jolly	Perry	Walden
Jones	Pittenger	Walker
Jordan	Pitts	Walorski
Joyce	Poe (TX)	Walters, Mimi
Katko	Poliquin	Weber (TX)
Kelly (PA)	Pompeo	Webster (FL)
King (IA)	Posey	Wenstrup
King (NY)	Price (GA)	Westerman
Kinzinger (IL)	Ratcliffe	Westmoreland
Kline	Reed	Whitfield
Knight	Reichert	Williams
Labrador	Renacci	Wilson (SC)
LaMalfa	Ribble	Wittman
Lamborn	Rice (SC)	Womack
Lance	Rigell	Woodall
Latta	Roby	Yoder
Lipinski	Rogers (AL)	Yoho
LoBiondo	Rogers (KY)	Young (IA)
Long	Rohrabacher	Young (IN)
Loudermilk	Rokita	Zeldin
Love	Rooney (FL)	Zinke
Lucas	Ros-Lehtinen	

NOT VOTING—13

□ 1657

Messrs. GOSAR, BOST, COFFMAN, SALMON, LUETKEMEYER, ROYCE, and ROSKAM changed their vote from “yea” to “nay.”

Mr. SWALWELL of California and Ms. SLAUGHTER changed their vote from “nay” to “yea.”

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

The SPEAKER pro tempore. The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. SCOTT of Virginia. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 239, noes 186, not voting 8, as follows:

[Roll No. 58]

## AYES—239

Abraham Griffith Paulsen  
Aderholt Grothman Pearce  
Allen Guinta Perry  
Amash Guthrie Pittenger  
Amodeli Hanna Pitts  
Babin Hardy Poe (TX)  
Barletta Harper Pompeo  
Barr Harris Posey  
Barton Hartzler Price (GA)  
Benishek Heck (NV) Ratcliffe  
Bilirakis Hensarling Reed  
Bishop (MI) Herrera Beutler Reichert  
Bishop (UT) Hice (GA) Renacci  
Black Hill Ribble  
Blackburn Holding Rice (SC)  
Blum Hudson Rigell  
Bost Huelskamp Roby  
Boustany Huizenga (MI) Rogers (AL)  
Brady (TX) Hultgren Rogers (KY)  
Brat Hunter Rohrabacher  
Bridenstine Hurd (TX) Rokita  
Brooks (AL) Hurt (VA) Rooney (FL)  
Brooks (IN) Issa Ros-Lehtinen  
Buchanan Jenkins (KS) Roskam  
Buck Jenkins (WV) Ross  
Bucshon Johnson (OH) Rothfus  
Burgess Johnson, Sam Rouzer  
Byrne Jolly Royce  
Calvert Jones Russell  
Carter (GA) Jordan Ryan (WI)  
Carter (TX) Joyce Salmon  
Chabot Kelly (PA) Sanford  
Chaffetz King (IA) Scalise  
Clawson (FL) King (NY) Schock  
Coffman Kinzinger (IL) Schweikert  
Cole Kline Scott, Austin  
Collins (GA) Knight Sensenbrenner  
Collins (NY) Labrador Sessions  
Comstock LaMalfa Shimkus  
Conaway Lamborn Shuster  
Cook Lance Simpson  
Costello (PA) Latta Smith (MO)  
Cramer LoBiondo Smith (NE)  
Crawford Long Smith (NJ)  
Crenshaw Loudermilk Smith (TX)  
Culberson Love Stefanik  
Curbelo (FL) Lucas Stewart  
Davis, Rodney Luetkemeyer Stivers  
Denham Lummis Stutzman  
Dent MacArthur Thompson (PA)  
DeSantis Marchant Thornberry  
DesJarlais Marino Tiberi  
Diaz-Balart Massie Tipton  
Duffy McCarthy Trott  
Duncan (SC) McCaul Turner  
Duncan (TN) McClintock Upton  
Ellmers McHenry Valadao  
Emmer McKinley Wagner  
Farenthold McMorris Walberg  
Fincher Rodgers Walden  
Fitzpatrick MeSally Walker  
Fleischmann Meadows Walorski  
Fleming Meehan Walters, Mimi  
Flores Messer Weber (TX)  
Forbes Mica Webster (FL)  
Fortenberry Miller (FL) Wenstrup  
Foss Miller (MI) Westerman  
Franks (AZ) Moolenaar Westmoreland  
Frelinghuysen Mooney (WV) Whitfield  
Garrett Mullin Williams  
Gibbs Mulvaney Wilson (SC)  
Gibson Murphy (PA) Wittman  
Gohmert Neugebauer Womack  
Goodlatte Newhouse Woodall  
Gosar Noem Yoder  
Gowdy Nugent Yoho  
Granger Nunes Young (IA)  
Graves (GA) Olson Young (IN)  
Graves (LA) Palazzo Zeldin  
Graves (MO) Palmer Zinke

## NOES—186

Adams Brownley (CA) Clay  
Aguilar Bustos Cleaver  
Ashford Butterfield Clyburn  
Bass Capps Cohen  
Beatty Capuano Connolly  
Becerra Cárdenas Conyers  
Bera Carney Cooper  
Beyer Carson (IN) Costa  
Bishop (GA) Cartwright Courtney  
Blumenauer Castor (FL) Crowley  
Bonamici Castro (TX) Cuellar  
Boyle (PA) Cicilline Cummings  
Brady (PA) Clark (MA) Davis (CA)  
Brown (FL) Clarke (NY) Davis, Danny

DeFazio Kind  
DeGette Kirkpatrick  
Delaney Kuster  
DeLauro Langevin  
DelBene Larsen (WA)  
DeSaulnier Larson (CT)  
Deutch Lawrence  
Dingell Levin  
Doggett Lewis  
Dold Lieu (CA)  
Doyle (PA) Lipinski  
Edwards Loeb sack  
Ellison Lowenthal  
Engel Lowey  
Eshoo Lujan Grisham  
Esty (NM)  
Farr Lujan, Ben Ray  
Fattah (NM)  
Foster Lynch  
Frankel (FL) Maloney,  
Fudge Carolyn  
Gabbard Maloney, Sean  
Gallego Matsui  
Garamendi McCollum  
Graham McDermott  
Grayson McGovern  
Green, Al McNerney  
Green, Gene Meeks  
Grijalva Meng  
Hahn Moore  
Hastings Moulton  
Heck (WA) Murphy (FL)  
Higgins Nadler  
Himes Napolitano  
Hinojosa Neal  
Honda Nolan  
Hoyer Norcross  
Huffman O'Rourke  
Israel Pallone  
Jackson Lee Pascarell  
Jeffries Payne  
Johnson (GA) Pelosi  
Johnson, E. B. Perlmutter  
Kaptur Peters  
Katko Peterson  
Keating Pingree  
Kelly (IL) Pocan  
Kennedy Poliquin  
Kildee Polis  
Kilmer Price (NC)

## NOT VOTING—8

Chu (CA) Lee  
Duckworth Lofgren  
Gutiérrez Nunnelee

## ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.

□ 1705

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

## PERSONAL EXPLANATION

Mr. GUTIÉRREZ. Mr. Speaker, I was unavoidably absent in the House chamber for votes on Wednesday, January 28, 2015 through Tuesday, February 3, 2015.

Had I been present on Wednesday, January 28, 2015, I would have voted "yea" on roll call vote 49, and "nay" on roll call vote 50 against final passage of H.R. 351, the LNG Permitting Certainty and Transparency Act.

Had I been present on Monday, February 2, 2015, I would have voted "yea" on roll call vote 51, "yea" on roll call vote 52, and "yea" on roll call vote 53.

On Tuesday, February 3, 2015 I would have voted "nay" on roll call vote 54, "nay" on roll call vote 55, and "nay" on roll call vote 56. I would have voted "yea" on roll call vote 57, and finally I would have voted "nay" on roll call vote 58 in strong opposition to H.R. 596, the 56th vote to repeal the Patient Protection and Affordable Care Act.

## PERSONAL EXPLANATION

Mr. ROE of Tennessee. Mr. Speaker, I was unable to vote today because of a serious illness in my family. Had I been present, I would have voted: Roll Call #57—Nay; Roll Call #58—Yea.

## MESSAGE FROM THE SENATE

A message from the Senate by Ms. Curtis, one of its clerks, announced that the Senate has passed without amendment a bill of the House of the following title:

H.R. 203. An act to direct the Secretary of Veterans Affairs to provide for the conduct of annual evaluations of mental health care and suicide prevention programs of the Department of Veterans Affairs, to require a pilot program on loan repayment for psychiatrists who agree to serve in the Veterans Health Administration of the Department of Veterans Affairs, and for other purposes.

## ELECTING MEMBERS TO CERTAIN STANDING COMMITTEES OF THE HOUSE OF REPRESENTATIVES

Mr. BECERRA. Madam Speaker, by direction of the Democratic Caucus, I offer a privileged resolution and ask for its immediate consideration.

The Clerk read the resolution, as follows:

## H. RES. 77

*Resolved*, That the following named Members be and are hereby elected to the following standing committees of the House of Representatives:

(1) COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM.—Mr. Welch and Ms. Michelle Lujan Grisham of New Mexico.

(2) COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY.—Mr. Perlmutter and Mr. Tonko.

(3) COMMITTEE ON SMALL BUSINESS.—Ms. Adams.

(4) COMMITTEE ON VETERANS' AFFAIRS.—Mr. Walz and Mr. McNerney.

Mr. BECERRA (during the reading). Madam Speaker, I ask unanimous consent that the resolution be considered as read and printed in the RECORD.

The SPEAKER pro tempore (Ms. MCSALLY). Is there objection to the request of the gentleman from California?

There was no objection.

The resolution was agreed to.

A motion to reconsider was laid on the table.

## APPOINTMENT OF MEMBERS TO THE HOUSE DEMOCRACY PARTNERSHIP

The SPEAKER pro tempore. The Chair announces the Speaker's appointment, pursuant to section 4(b) of House Resolution 5, One Hundred Fourteenth Congress, and the order of the House of January 6, 2015, of the following Members to the House Democracy Partnership:

Mr. ROSKAM, Illinois, Chairman  
Mr. FORTENBERRY, Nebraska  
Mr. BOUSTANY, Louisiana  
Mr. CONAWAY, Texas  
Mr. BUCHANAN, Florida